

Measures from the Adult Social Care Outcomes Framework

England 2015-16, Final release

Published 05 October 2016

This report focuses on the key findings for each measure in the Adult Social Care Outcome Framework in 2015-16.

Key findings

4B: The proportion of people who use services who say that those services have made them feel safe and secure

- In 2015-16, 85.4 per cent of service users in England reported that the services they received helped make them feel safe and secure. This is a statistically significant increase compared to the 84.5 per cent reported in 2014-15.

2C: Delayed transfers of care from hospital, and those which are attributable to social care or jointly to social care and the NHS, per 100,000 population

- 12.1 adults per 100,000 population in England experienced a delayed transfer of care in 2015-16, with 4.7 per 100,000 of these being attributable to social care or jointly to social care and the NHS.
- The rates of delayed transfers of care, and those that are attributable to social care or jointly to social care and the NHS, have risen each year from 2013-14.

1B: The proportion of people who use services who have control over their daily lives

- In 2015-16, 76.6 per cent of service users in England reported they have control over their daily lives. In 2014-15, this figure was 77.3 per cent.
- Although this change is not statistically significant, the proportion of respondents who stated they had 'no control over their daily lives' (in response to the same survey question), increased from 5.1 per cent in 2014-15 to 5.6 per cent in 2015-16. This was a statistically significant change.

1I: Proportion of people who use services, and their carers, who reported that they had as much social contact as they would like

- In 2015-16, 45.4 per cent of service users in England reported they had as much social contact as they would like. In 2014-15, this figure was 44.8 per cent.
- Although this change is not statistically significant, the proportion of respondents who stated they had little social contact and feel socially isolated (in response to the same question) increased from 5.1 to 5.6 per cent. This was a statistically significant change.
- Furthermore, the proportion of respondents reporting they had adequate social contact in 2015-16 (32.6 per cent) represents a statistically significant reduction compared to the 33.6 per cent reported in 2014-15.

Contents

Introduction	5
Chapter 1: Domains and data sources	6
Chapter 2: Summary of ASCOF Measures	7
Chapter 3: Domain 1 – Enhancing quality of life for people with care and support needs	11
1A: Social care-related quality of life	12
1B: The proportion of people who use services who have control over their daily lives	13
1C: The proportion of people using social care who receive self-directed support, and those receiving direct payments	16
1E: Proportion of adults with learning disabilities in paid employment	21
1F: Proportion of adults in contact with secondary mental health services in paid employment	24
1G: Proportion of adults with learning disabilities who live in their own home or with their family	27
1H: Proportion of adults in contact with secondary mental health services living independently, with or without support	30
1I: Proportion of people who use services, and their carers, who reported that they had as much social contact as they would like	32
Chapter 4: Domain 2 - Delaying and reducing the need for care and support	35
2A: Long-term support needs met by admission to residential and nursing care homes, per 100,000 population	36
2B: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	39
2C: Delayed transfers of care from hospital, and those which are attributable to social care or jointly to social care and the NHS, per 100,000 population	46
2D: The outcome of short-term services: sequel to service	51
Chapter 5: Domain 3 - Ensuring that people have a positive experience of care and support	53
3A: Overall satisfaction of people who use services with their care and support	54
3D: The proportion of people who use services and carers who find it easy to find information about services	55

Chapter 6: Domain 4 - Safeguarding people whose circumstances make them vulnerable and protecting from avoidable harm **58**

4A: The proportion of people who use services who feel safe	59
4B: The proportion of people who use services who say that those services have made them feel safe and secure	62

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The Adult Social Care Outcomes Framework aims to give an indication of the strengths and weaknesses of social care in delivering better outcomes for people who use services. This report will be of interest to central government (for policy development and monitoring), local government (for benchmarking), charities, academics and the general public.

Introduction

This report provides the findings from the Adult Social Care Outcomes Framework (ASCOF) in England for the period 1 April 2015 to 31 March 2016. The ASCOF draws on data from a number of collections; details of these data sources and which measures they are used for can be found in the Data Sources chapter within this report. Further details of the measures, including the purpose of the framework, can be found in the ASCOF Handbook of Definitions, which is published by the Department of Health¹.

The ASCOF measures how well care and support services achieve the outcomes that matter most to people. The measures are grouped into four domains which are typically reviewed in terms of movement over time. Time-based comparisons are not always appropriate however, and further explanations on changes that affect comparisons over time can be found in Appendix C (comparability over time).

Some of the measures included use survey data (the Adult Social Care Survey and the Survey of Adult Carers in England – SACE) and are therefore based on a sample of possible respondents. It is not possible to know the true value for the overall population in these cases, however the variation present in the sampled data can be used to assess whether a change or difference is statistically significant. Where this is the case, statistical significance will be stated in the report. The non-survey-based measures use transactional data drawn from operational systems and so use all reported data points. Any changes or differences presented, on the assumption of robust data quality, can therefore be taken as conclusive.

This report presents the England level findings for each measure. In addition, some key findings on regional figures and disaggregations are also included in this report. Data is also available by Councils with Adult Social Services Responsibilities (CASSRs). From this point onwards, CASSRs will be referred to as councils within this report. The council level data, along with regional totals and totals for council types for 2015-16, 2014-15², 2013-14³, 2012-13⁴ and 2011-12⁵ are available on the NHS Digital website. This data are available in the accompanying Excel disaggregated annex file and CSV.

¹ <https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascof-2015-to-2016>

² <http://digital.nhs.uk/pubs/adusoccareof1415fin>

³ <http://digital.nhs.uk/pubs/adusoccareof1314fin>

⁴ <http://digital.nhs.uk/pubs/adusoccareof1213fin>

⁵ <http://digital.nhs.uk/pubs/adultsocialcareoutcomes1112>

Chapter 1: Domains and data sources

The Adult Social Care Outcome Framework measures how well care and support services achieve the outcome that matters most to people. The measures are split into four domains. The domains are;

Domain 1 – Enhancing quality of life for people with care and support needs

Domain 2 – Delaying and reducing the need for care and support

Domain 3 – Ensuring that people have a positive experience of care and support

Domain 4 – Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm

The report is set out in four chapters to cover each of the four ASCOF domains.

Data sources

This report combines data from several data sources:

- Personal Social Services Adult Social Care Survey (ASCS) – used in measures 1A, 1B, 1I(1), 3A, 3D(1), 4A and 4B <http://www.digital.nhs.uk/pubs/adusoccaresurv1516>
- Personal Social Services Survey of Adult Carers (SACE) – used in measures 1D, 1I(2), 3B, 3C and 3D(2)
- Short and Long Term Support (SALT) – 1C, 1E, 1G, 2A, 2B and 2D <http://digital.nhs.uk/pubs/commcaressa1516>
- Mental Health and Learning Disabilities Dataset (MHLDDS) – 1F and 1H <http://digital.nhs.uk/mhlldsmonthly>
- Delayed Transfers of Care (DToC) – 2C <http://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/delayed-transfers-of-care-data-2015-16/>
- Hospital Episode Statistics (HES) – 2B <http://digital.nhs.uk/hes>
- Office for National Statistics (ONS) mid-year population estimates⁶ – 2A and 2C www.ons.gov.uk/ons/taxonomy/index.html?nscl=Population+Estimates

The Carers' Survey is biennial and will next be produced in 2016-17. No scores were calculated for the Carers' Survey based measures in 2015-16. The latest publication is available at <http://digital.nhs.uk/catalogue/PUB18423>

Further details on each of these data sources are given in the Appendices report, Appendix A: 'Editorial Notes'.

⁶ The ONS mid-year population estimates used to calculate the final ASCOF figures for 2015-16 are for 2015 (the midpoint of 2015-16).

Chapter 2: Summary of ASCOF Measures

Before making comparisons over time, the information in Appendix C (comparability over time) should be considered. Footnotes are underneath table 1.4.

Table 1.1: Summary of ASCOF outcome measure values: by measure and year
England, 2011-12 to 2015-16

Measure (units)	2011-12	2012-13 (no weights) ¹	2013-14	2014-15 ³	2015-16
1A Social care-related quality of life (score out of 24)	18.7 [▲]	18.8 [▲]	19.0 [▲]	b 19.1	19.1
1B Proportion of people who use services who have control over their daily life (%)	75.1	76.1 [▲]	76.8	b 77.3	76.6
1C(1) Proportion of people using social care who receive self-directed support (%)	43.0	56.2	61.9	x	x
1C(2) Proportion of people using social care who receive direct payments (%)	13.7	16.8	19.1	x	x
1C(1a) Proportion of people using social care receiving self-directed support (%)	x	x	x	83.8	86.9
1C(1b) Proportion of carers receiving self-directed support (%)	x	x	x	76.9	77.7
1C(2a) Proportion of people using social care receiving direct payments (%)	x	x	x	26.3	28.1
1C(2b) Proportion of carers receiving direct payments for support direct to carer (%)	x	x	x	67.6	67.4
1D Carer-reported quality of life (score out of 12)	x	8.1 (8.1)	v	7.9 [▼]	v
1E Proportion of adults with a learning disability in paid employment (%)	7.1	7.0	6.7	b 6.0	5.8
1F Proportion of adults in contact with secondary mental health services in paid employment (%)	8.9	8.8	7.0	6.8	6.7
1G Proportion of adults with a learning disability who live in their own home or with their family (%)	70.0	73.5	74.9	b 74.0	75.4
1H Proportion of adults in contact with secondary mental health services who live independently, with or without support (%)	54.6	58.5	60.8	59.7	58.6
1I(1) Proportion of people who use services who reported that they have as much social contact as they would like (%)	42.3	43.2	44.5 [▲]	b 44.8	45.4
1I(2) Proportion of carers who reported that they have as much social contact as they would like (%)	x	41.4 (41.3)	v	38.5 [▼]	v

Source: ASCS, SALT, SACE, MHLDDS

Table 1.2: Summary of ASCOF outcome measure values: by measure and year

England, 2011-12 to 2015-16

Measure (units)	2011-12 (adjusted ²)	2012-13	2013-14	2014-15 ³	2015-16
2A(1) Permanent admissions to residential and nursing care homes for younger adults (per 100,000 population)	19.1 (14.0)	15.0	14.4	x	x
2A(2) Permanent admissions to residential and nursing care homes for older adults (per 100,000 population)	695.9 (694.2)	697.2	650.6	x	x
2A(1) Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population 2014-15	x	x	x	14.1	13.3
2A(2) Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population 2014-15	x	x	x	658.5	628.2
2B(1) Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (effectiveness of the service) (%)	82.7	81.4	82.5	81.9	82.7
2B(2) Proportion of older people (65 and over) who were offered reablement services following discharge from hospital (%)	3.2	3.2	3.3	3.1	2.9
2C(1) Delayed transfers of care from hospital (per 100,000 population)	9.7	9.4	9.6	11.1	12.1
2C(2) Delayed transfers of care from hospital, and those which are attributable to adult social care (per 100,000 population)	3.7	3.2	3.1	3.7	4.7
2D Proportion of those that received short-term service during the year where sequel was either no ongoing support or support of a lower level (%)	x	x	x	74.3	75.8

Source: SALT, HES, ONS, DTtoC

Table 1.3: Summary of ASCOF outcome measure values: by measure and year

England, 2011-12 to 2015-16

Measure (units)	2011-12	2012-13 (no weights) ¹	2013-14	2014-15 ³	2015-16
3A Overall satisfaction of people who use services with their care and support (%)	62.8	64.1 [▲]	64.8 b	64.7	64.4
3B Overall satisfaction of carers with social services (%)	x	43.1 (42.7)	v	41.2 [▼]	v
3C Proportion of carers who report that they have been included or consulted in discussion about the person they care for (%)	x	73.3 (72.9)	v	72.3	v
3D Proportion of people who use services and carers who find it easy to find information about services (%)	73.8	71.4	x	x	x
3D(1) Proportion of people who use services who find it easy to find information about services (%)	73.8	74.1	74.5 b	74.5	73.5
3D(2) Proportion of carers who find it easy to find information about services (%)	x	68.9 (68.7)	v	65.5 [▼]	v

Source: ASCS & SACE

Table 1.4: Summary of ASCOF outcome measure values: by measure and year

England, 2011-12 to 2015-16

Measure (units)	2011-12	2012-13	2013-14	2014-15 ³	2015-16
4A Proportion of people who use services who feel safe (%)	63.8 [▲]	65.1 [▲]	66.0 [▲] b	68.5	69.2
4B Proportion of people who use services who say that those services have made them feel safe and secure (%)	75.5	78.1 [▲]	79.1 [▲] b	84.5	85.4 [▲]

Source: ASCS

Notes:

b Denotes a break in the time series. Further details can be found in Appendix C (comparability over time).

v The Carers' Survey is carried out biennially, and was first conducted in 2012-13; therefore there are no outcome scores for measures based on Carers' Survey data for 2013-14 or 2015-16.

x Represents 'not applicable'; over the course of time, new measures have been introduced to ASCOF, and some measures have been discontinued or superseded. Therefore, outcome scores are not available for all measures for all years.

▲, ▼ The Adult Social Care Survey and Carers' Survey use sampling and therefore differences in outcomes for the measures based on these data (1A, 1B, 1D, 1I, 3A, 3B, 3B, 3C, 3D, 4A and 4B) may not be statistically significant. Where data are comparable between years, a

statistically significant increase (or reduction) in the outcome score as compared to the previous year is denoted by ▲ (or ▼).

1. In 2014-15, a new weighting methodology was implemented for the Carers' Survey at regional and national level; the 2012-13 scores have been reweighted accordingly, and the original unweighted scores are presented here in brackets. Further detail is available in Appendix C (comparability over time).
2. In 2011-12 there was a transfer of funding of service users with a learning disability from the NHS to councils. These service users were classed as new admissions in 2011-12 as the source of funding had changed even though they had been receiving a service previously. The adjusted score presented in brackets is the estimated national outcome had no such transfer taken place. Further detail is available in Appendix C (comparability over time).
3. This is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the SALT-based ASCOF scores (1C, 1E, 1G, 2A, 2B and 2D) originally published in the 2014-15 publication should no longer be used.

Chapter 3: Domain 1 – Enhancing quality of life for people with care and support needs

This chapter focuses on the first domain in the ASCOF: enhancing quality of life for people with care and support needs. There are nine outcome measures within this domain, and data to populate these measures come from a number of sources:

- Adult Social Care Survey (ASCS);
- Short and Long-Term (SALT) return;
- Carers' Survey (SACE); and
- Mental Health Datasets (MHLDDS and MHMDS).

The ASCOF states that “the following outcome statements support this domain:

- Carers can balance their caring roles and maintain their desired quality of life.
- People manage their own support as much as they wish, so that they are in control of what, how and when support is delivered to match their needs.
- People are able to find employment when they want, maintain a family and social life and contribute to community life, and avoid loneliness or isolation.”

A summary of all the measure outcomes for domain 1 is provided in **Table 1.1** in Chapter 2 (summary of ASCOF Measures). Before making comparisons over time, the information in Appendix C (comparability over time) should be considered.

The Carers' Survey is biennial and will next be produced in 2016-17. No scores were calculated for the Carers' Survey based measures in 2015-16. The Carers' Survey based measures in domain 1 are; 1D and 1I(2).

The Department of Health's Handbook of Definitions⁷ provides the rationale, definition, formula and worked example of each measure.

⁷ <https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascof-2015-to-2016>

1A: Social care-related quality of life

Outcome – 2015-16 findings

The overall social care-related quality of life (SCRQoL) score reported for England in 2015-16 was 19.1. **Table 1A.1** shows that London has the lowest score (18.6) and the North East has the highest score (19.5). Although no region is statistically significantly higher than the others, London is statistically significantly lower than all other regions on this measure.

The England 18-64 group reported a higher score at 19.4, compared to 18.9 for the 65 and over group. As in 2014-15, across all regions respondents in the 18-64 group reported a higher social care-related quality of life score than those in the 65 and over group.

Table 1A.1: Social Care related quality of life (1A) scores; by region and age

England, 2015-16	Sample sizes and scores out of 24					
	18-64		65 and over		Total	
	Sample size	Outcome	Sample size	Outcome	Sample size	Outcome
England	26,490	19.4	36,690	18.9	63,188	19.1
North East	1,749	19.8	2,724	19.4	4,474	19.5
North West	4,094	19.2	5,579	19.1	9,677	19.1
Yorkshire and the Humber	2,578	19.4	3,658	19.0	6,236	19.1
East Midlands	1,374	19.5	2,054	18.7	3,428	19.0
West Midlands	2,494	19.3	3,419	18.9	5,913	19.0
Eastern	2,467	19.5	3,409	18.8	5,876	19.0
London	6,191	18.9	8,047	18.3	14,238	18.6
South East	2,957	19.9	4,143	19.0	7,103	19.3
South West	2,586	19.6	3,657	19.1	6,243	19.3

Source: ASCS

In England, males had a higher reported quality of life score (19.3) than females (19.0). This pattern was repeated across all nine regions. Further details on the regional scores, by gender can be found in the accompanying annex files (**Table 1A.2** of Tables and Charts Annex).

Outcome – time series findings

The England SCRQoL has remained the same from 2014-15 and 2015-16 at 19.1. Further details can be found in the accompanying annex files (**Table 1A.3** of Tables and Charts Annex).

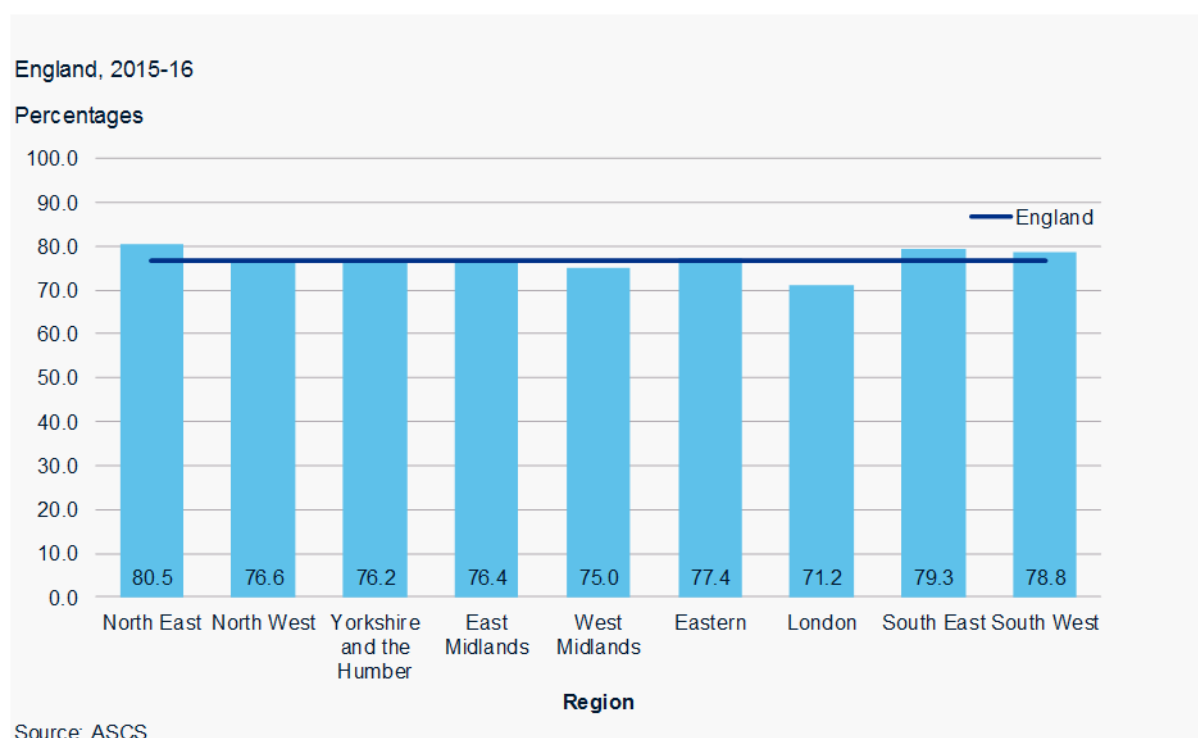
1B: The proportion of people who use services who have control over their daily lives

Outcome – 2015-16 findings

In 2015-16, 76.6 per cent of service users in England reported they have control over their daily lives.

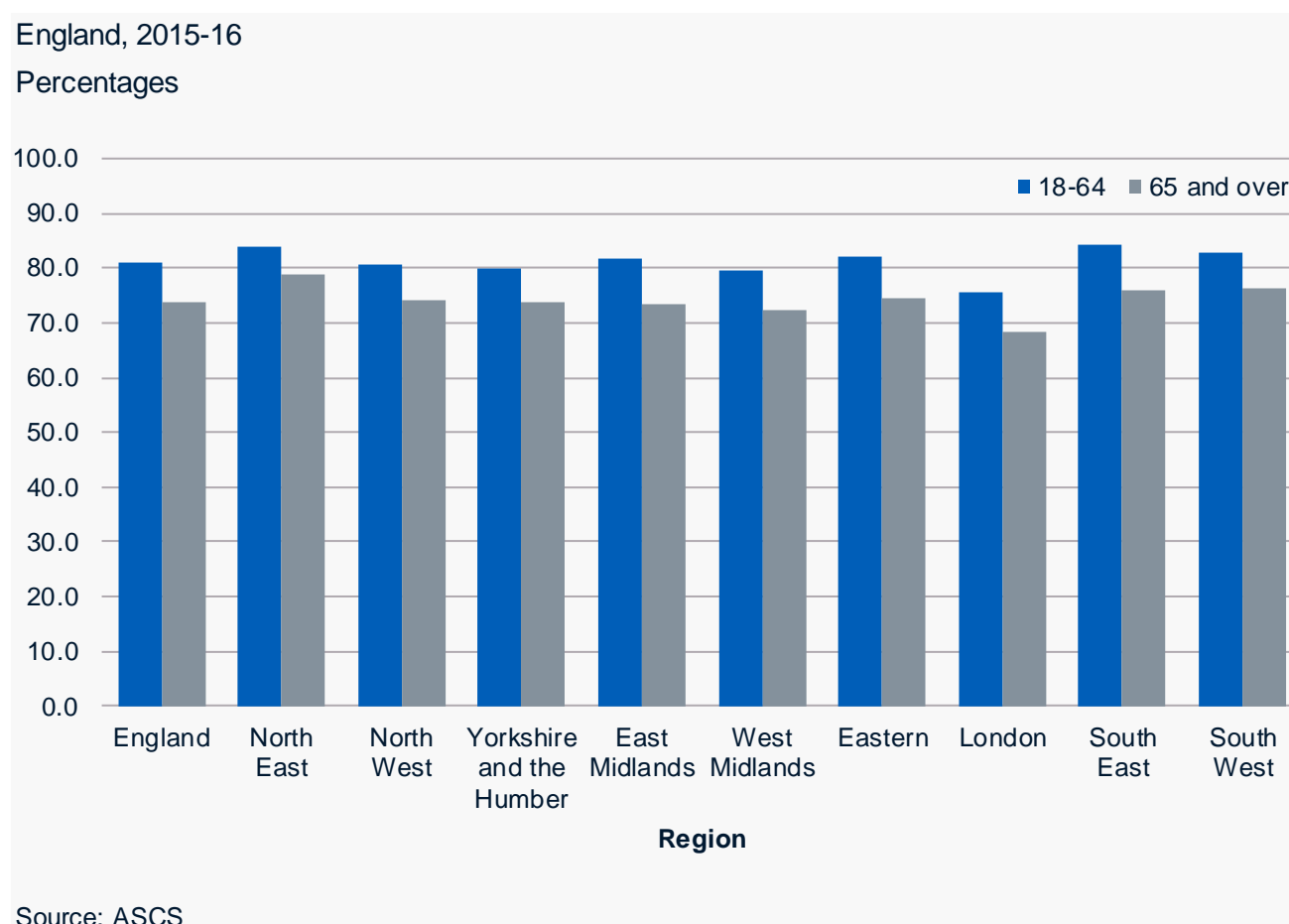
Figure 1B.1 shows the proportions varied across regions with London having the lowest (71.2 per cent) and the North East the highest (80.5 per cent) reported figures. As with measure 1A above, although no region is statistically significantly higher than the others, London is statistically significantly lower than all other regions on this measure.

Figure 1B.1: The proportion of people who use services who have control over their daily lives; by region



In England, a higher proportion of 18-64 year olds (80.9 per cent) reported feeling that they had control over their daily lives compared to 65 and overs (73.9 per cent). **Figure 1B.2** shows that for all regions, the 18-64 year old age groups had a higher proportion that reported feeling that they had control over their daily lives compared to the 65 and over age groups.

Figure 1B.2: The proportion of people who use services who have control over their daily lives; by region and age



A higher proportion of males (78.2 per cent) compared to females (75.5 per cent) in England reported they had control over their daily lives. This pattern was the same in all regions with the proportion higher for males than females. Further details on the regional scores by gender can be found in the accompanying annex files (**Table 1B.1** of Tables and Charts Annex).

Outcome – time series findings

The source data for this measure is collected via question 3a of the Adult Social Care Survey with scores calculated as the combined proportion of respondents who report that they have as much control over their daily lives as they’d want and an adequate amount of control.

The proportion of people who use services who report having control over their daily life decreased from 77.3 per cent in 2014-15 to 76.6 per cent in 2015-16. This decrease was not statistically significant. Further details can be found in the accompanying annex files (Table 1B.3 of Tables and Charts Annex).

Although the changes observed on this measure between 2015-16 and 2014-15 are not statistically significant, the proportion of respondents who stated they had ‘no control over their daily lives’ increased from

5.1 per cent in 2014-15 to 5.6 per cent in 2015-16. This was a statistically significant change. Further information can be found in the Adult Social Care Survey publication⁸.

⁸ <http://www.digital.nhs.uk/pubs/adusoccaresurv1516>

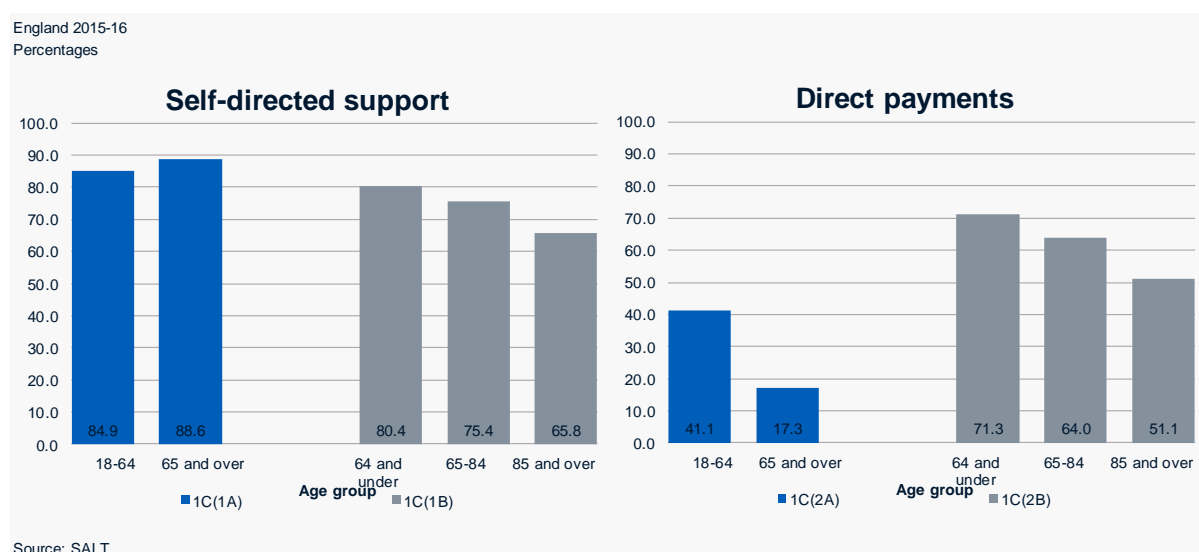
1C: The proportion of people using social care who receive self-directed support, and those receiving direct payments

Outcome – 2015-16 findings

In 2015-16, 86.9 per cent of service users were reported as receiving self-directed support, compared to 77.7 per cent of carers. Conversely, 28.1 per cent of service users were reported as receiving direct payments, compared to 67.4 per cent of all carers.

Figure 1C.1 then shows that as the age of the service user increases, the proportion receiving self-direct support also increases. The reverse however is true for carers; as the age of the carer increases, the proportion receiving self-directed support decreases. Similarly, **Figure 1C.1** also shows that as the age of the service user increases, the proportion receiving direct payments decreases. This is also true for carers.

Figure 1C.1: The proportion of people using social care who receive self-directed support (1C(1)), and those receiving direct payments (1C(2)); by age band

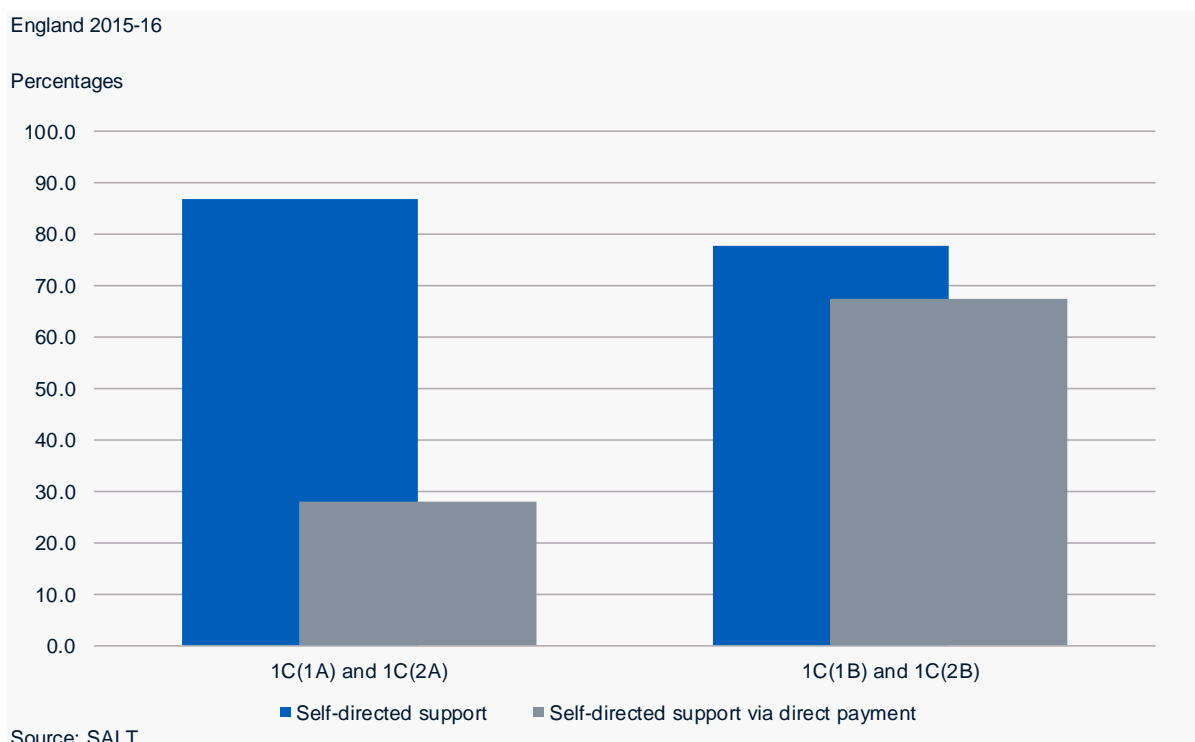


Whilst under the previous RAP data collection, service users and carers who received direct payments may also have been in receipt of self-directed support. It was possible to receive direct payments without a personal budget and so without self-directed support. With implementation of SALT and its associated guidance documentation, this should no longer be the case.

Figure 1C.2 shows the proportion of service users and carers that receive self-directed support and of those, the proportion that receive self-directed support via a direct payment.

Although 86.9 per cent of all service users received self-directed support, only 28.1 per cent (or 32.3 per cent of those receiving self-directed support) received this support via direct payments. Conversely, whilst 77.7 per cent of carers received self-directed support, 67.4 per cent (or 86.7 per cent of those in receipt of all forms of self-directed support) received this support via direct payment.

Figure 1C.2: The proportions of users (1C(1A) and 1C(2A)) and carers (1C(1B) and 1C(2B)) receiving self-directed support, and self-directed support via direct payments



Source: SALT

Figure 1C.3 shows the regional variation across the four measures. The figure shows there is little variation in the proportion of carers that receive self-direct support (1C(1B)) and those that receive this via direct payments (1C(2B)) for seven of the nine regions. The exceptions to this are the North East and London where there is a lower proportion of carers that receive self-directed support via direct payments.

For five regions, there were a higher proportion of service users that received self-directed support than carers. The exceptions to this were Eastern, London, South East and South West.

In summary:

- The proportion of service users that receive self-directed support ranges from 81.1 per cent (South West) to 96.0 per cent (East Midlands).
- The proportion of carers that receive self-directed support ranges from 55.4 per cent (South West) to 96.9 per cent (South East).

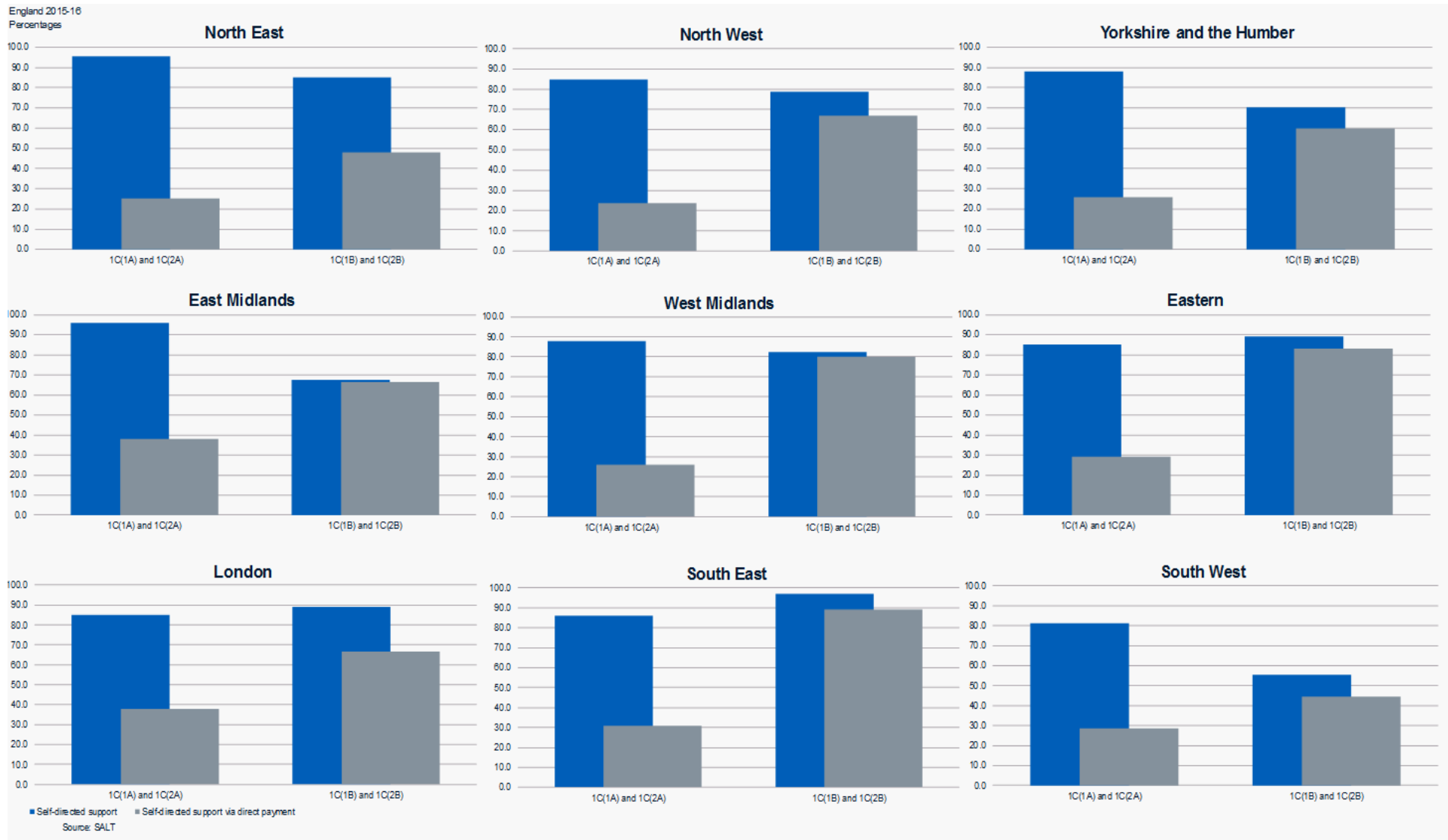
86.9 per cent of service users receive self-directed support, compared to **77.7** per cent of carers.

Conversely, **28.1** per cent of service users received direct payments. This compares to **67.4** per cent of all carers.

- In all regions, a higher proportion of carers (1C(2B)) received direct payments, compared to service users (1C(2A)).
- The proportion of service users that receive direct payments varies from 23.5 per cent (North West) to 37.9 per cent (East Midlands).
- The proportion of carers that receive direct payments varies from 44.4 per cent (South West) to 89.2 per cent (South East).

It should be noted when reviewing proportions at regional or council levels that councils may operate different service delivery models. Some councils may have a high proportion of carers that only receive information advice or other universal services / signposting and these carers are excluded from this measure, resulting in low denominators (i.e. the number of Carers (caring for someone aged 18 or over) receiving carer specific services in the year to 31st March). These lower denominators may then result in outcome scores that are higher than average, even where similar number of carers are being supported with self-directed support and direct payments.

Figure 1C.3: The proportions of service users (1C(1A) and 1C(2A)) and carers (1C(1B) and 1C(2B)) receiving self-directed support, and self-directed support via direct payments; by region



Outcome – time series findings

The proportion of service users that receive self-directed support increased from 83.8 per cent in 2014-15 to 86.9 per cent in 2015-16. The proportion of service users receiving their self-directed support via direct payment also increased, from 26.3 per cent to 28.1 per cent.

The proportion of carers that receive self-directed support increased from 76.9 per cent in 2014-15 to 77.7 per cent in 2015-16. The proportion of carers receiving their self-directed support via direct payment decreased from 67.6 per cent to 67.4 per cent. Further details can be found in the accompanying annex files (**Table 1C.4** of Tables and Charts Annex).

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report⁹ which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

⁹ <http://digital.nhs.uk/pubs/commcaressa1516>

1E: Proportion of adults with learning disabilities in paid employment

Outcome – 2015-16 findings

5.8 per cent of adults in England with a learning disability were reported as being in paid employment in 2015-16.

Figure 1E.1 shows how the proportion of adults with learning disabilities in paid employment varies by region: London reported the highest proportion of adults with a learning disability in paid employment (7.5 per cent), while the lowest proportion was reported in the East Midlands (3.3 per cent).

Figure 1E.1: Proportion of adults with learning disabilities in paid employment; by region

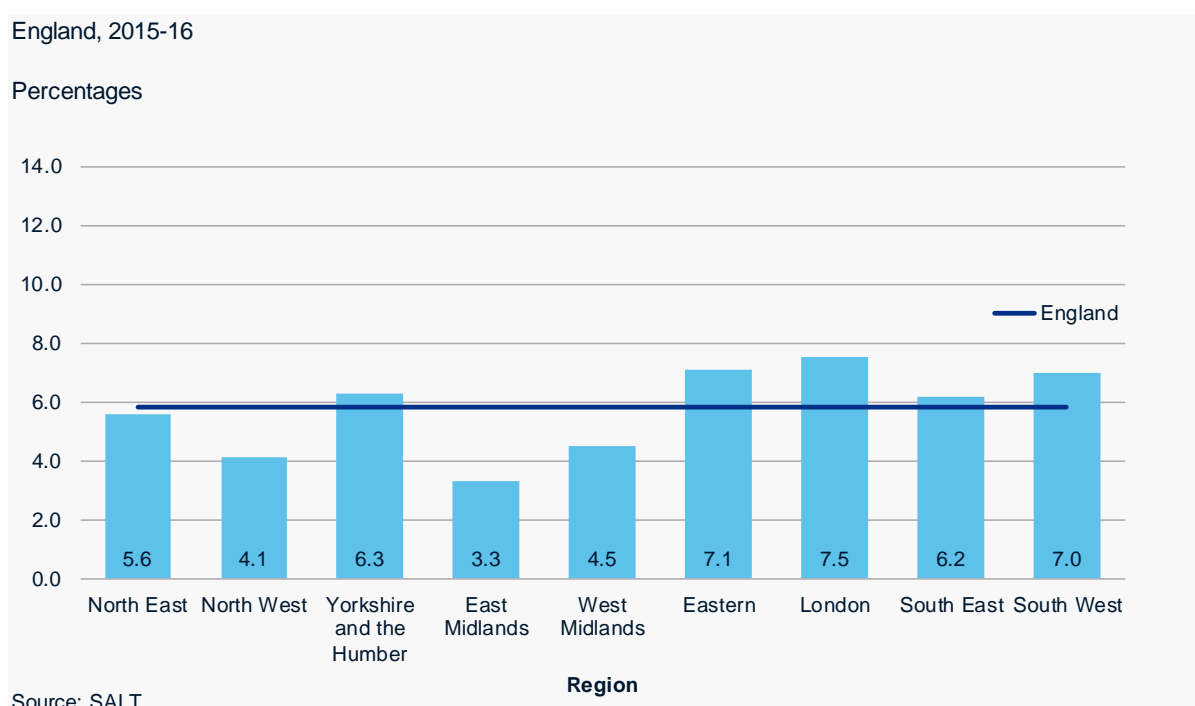


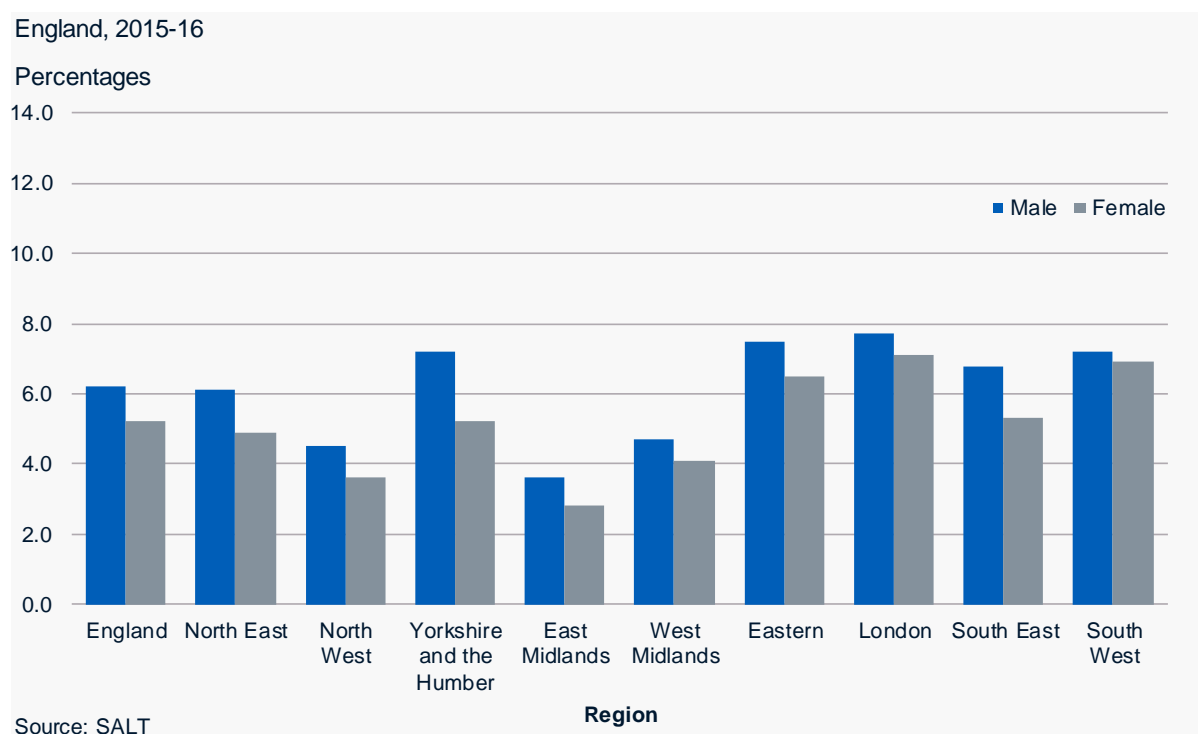
Figure 1E.2 shows a higher proportion of males (6.2 per cent) with learning disabilities were reported as being in paid employment in England compared to females (5.2 per cent). Similarly, across all regions, there are higher proportions of males with learning disabilities reported as being in paid employment than females. Further details can be found in the accompanying annex files (**Table 1E.1** of Tables and Charts Annex).

In summary,

- The proportion of males with learning disabilities in paid employment varied from 3.6 per cent (East Midlands) to 7.7 per cent (London).

- The proportion of females with learning disabilities in paid employment varied from 2.8 per cent (East Midlands) to 7.1 per cent (London).

Figure 1E.2: Proportion of adults with learning disabilities in paid employment; by gender and region



As with measure 1G (the reported proportion of adults with a learning disability who live in their own home or with their family), the denominators for these disaggregated figures are drawn from a different table within the SALT data collection template than the figure used for the total. The denominators for males and females combined (128,037) are higher than the total denominator (127,732). Further details on this are in the Short and Long Term Return section of the data quality appendix.

Outcome – time series findings

The proportion of adults in England with learning disabilities reported as being in paid employment decreased from 6.0 per cent in 2014-15 to 5.8 per cent in 2015-16. Further details can be found in the accompanying annex files (Table 1E.1 of Tables and Charts Annex).

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report¹⁰ which explains that only some of the councils who would have

¹⁰ <http://digital.nhs.uk/pubs/commcaressa1516>

liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

This measure considers the proportion of adults with a PSR of Learning Disability. SALT guidance states that if the latest employment status has not been captured during the reporting period, it should be reported as “unknown”. For councils with a high proportion of ‘unknown’ clients, clients recorded in paid employment could be lower than the actual number in paid employment, thus potentially lowering the ASCOF 1E numerator.

1F: Proportion of adults in contact with secondary mental health services in paid employment

Outcome – 2015-16 findings

In 2015-16, 6.7 per cent of adults in England in contact with secondary mental health services were reported as being in employment.

Figure 1F.1 shows the variation in this proportion by region. West Midlands (9.8 per cent) and the South West (9.4 per cent) reported the highest proportions, whilst East Midlands (4.7 per cent), North East (4.9 per cent), London (5.0 per cent) and Eastern (5.1 per cent) reported the lowest figures.

Figure 1F.1: Proportion of adults in contact with secondary mental health services in paid employment; by region

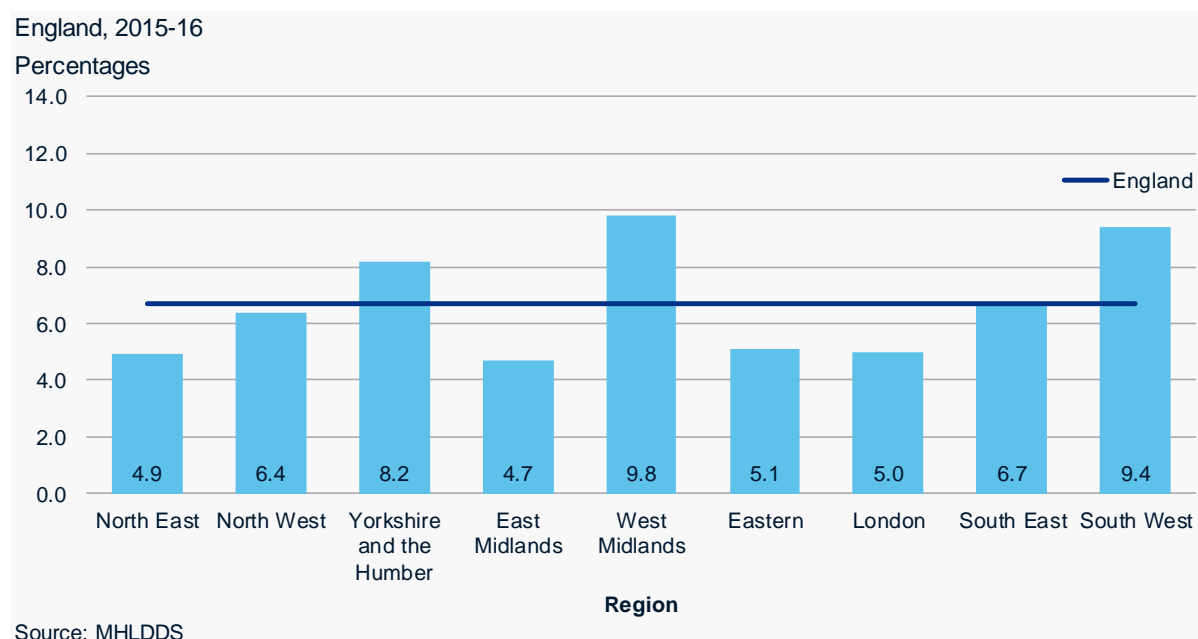
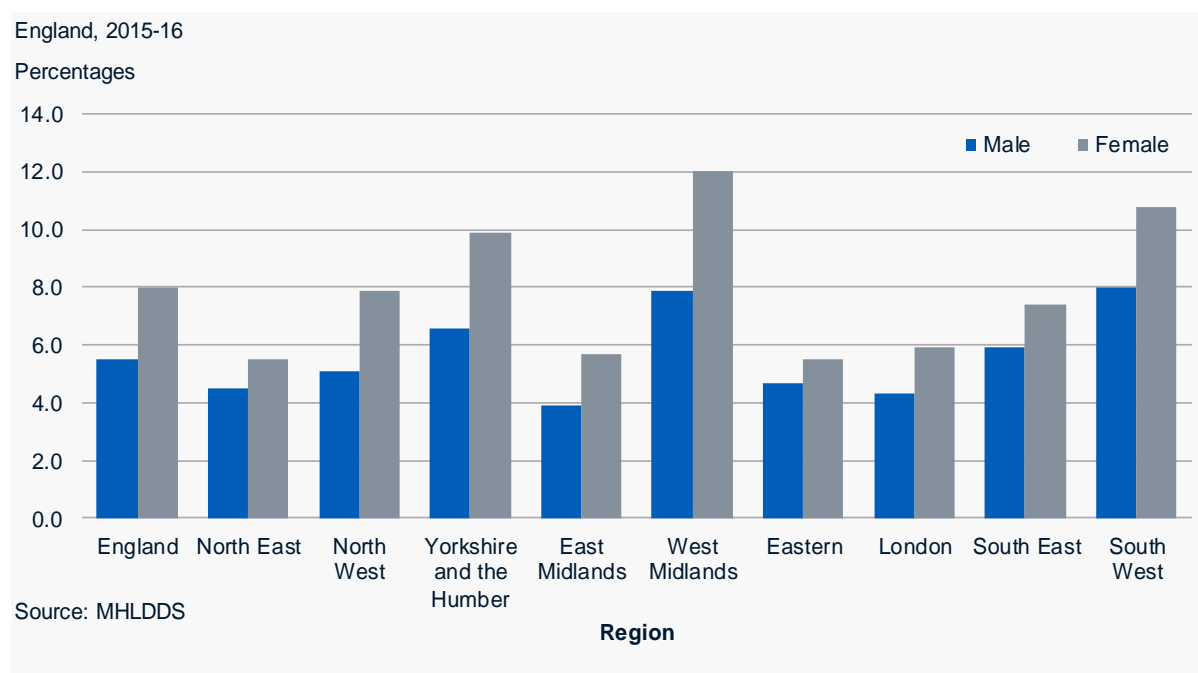


Figure 1F.2 shows for all nine regions, the proportion of females in contact with secondary mental health services reported as being in paid employment was higher than the proportion of males.

Figure 1F.2: Proportion of adults in contact with secondary mental health services in paid employment; by gender and region



The outcome measures for the proportion of adults in contact with secondary mental health services in paid employment are based on an average of monthly outcomes, and therefore only outcome scores are presented. The monthly data used to calculate these outcomes can be found in the accompanying annex files.

Additional information on employment in England generally is available via the ONS website¹¹.

Outcome – time series findings

Due to changes in the Mental Health Data set in January 2016, the 2015-16 outcomes are based on eight months of data rather than the usual 12. Further details are provided in Appendix C (comparability over time).

Table 1F.2 shows the percentage of adults in England in contact with secondary mental health services, and reported as being in paid employment, has fallen each year since 2013-14.

¹¹ <http://www.ons.gov.uk/ons/rel/subnational-labour/regional-labour-market-statistics/index.html>

Table 1F.2: Proportion of adults in contact with secondary mental health services in paid employment; by year

England, 2015-16 Percentages

	Outcome
2013-14	7.0
2014-15	6.8
2015-16	6.7

Source: MHLDDS / MHMDS

1G: Proportion of adults with learning disabilities who live in their own home or with their family

Outcome – 2015-16 findings

75.4 per cent of adults in England with a learning disability were reported as living in their own home or with their family in 2015-16.

Figure 1G.1 shows how this proportion varies by region. The North West has the highest proportion (88.9 per cent) and the lowest proportion is in the West Midlands (67.9 per cent).

Figure 1G.1: Proportion of adults with learning disabilities who live in their own home or with their family; by region

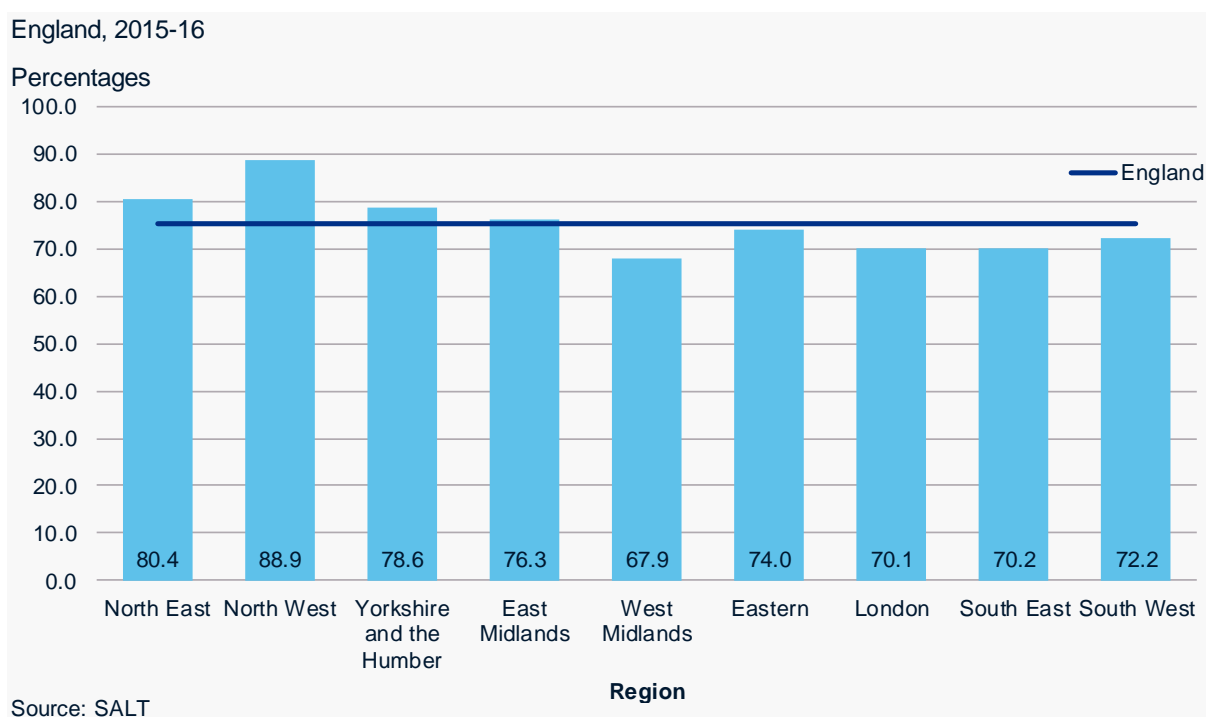


Table 1G.1 shows that a higher proportion of females (75.6 per cent) in England with a learning disability live in their own home or with their family compared to males (74.9 per cent). Furthermore, in six of the nine regions, there is a higher proportion of females with a learning disability who live in their own home or with their family than males.

In summary:

- The proportion of males with a learning disability who live in their own home or with their family varies from 67.6 per cent (West Midlands) to 88.9 per cent (North West).

- The proportion of females with a learning disability who live in their own home or with their family varies from 68.3 per cent (West Midlands) to 89.0 per cent (North West).

Table 1G.1: Proportion of adults with learning disabilities who live in their own home or with their family; by region and gender

England, 2015-16	<i>Numbers and percentages</i>								
	Male			Female			Total		
	Num.	Denom.	Outcome	Num.	Denom.	Outcome	Num.	Denom.	Outcome
England	56,106	74,873	74.9	40,182	53,164	75.6	96,288	127,732	75.4
North East	3,655	4,579	79.8	2,631	3,243	81.1	6,286	7,822	80.4
North West	9,765	10,986	88.9	6,740	7,573	89.0	16,505	18,559	88.9
Yorkshire and the Humber	6,168	7,767	79.4	4,768	6,138	77.7	10,936	13,905	78.6
East Midlands	4,873	6,384	76.3	3,436	4,503	76.3	8,309	10,887	76.3
West Midlands	4,891	7,240	67.6	3,473	5,083	68.3	8,364	12,323	67.9
Eastern	6,267	8,632	72.6	4,496	6,017	74.7	10,763	14,552	74.0
London	6,821	9,893	68.9	4,805	6,685	71.9	11,626	16,578	70.1
South East	8,334	12,066	69.1	5,910	8,486	69.6	14,244	20,291	70.2
South West	5,332	7,326	72.8	3,923	5,436	72.2	9,255	12,815	72.2

Source: SALT

As with measure 1E (proportion of adults with learning disabilities in paid employment), the denominators for these disaggregated figures are drawn from a different table in SALT to the figure used for the total. The denominators for males and females combined (128,037) are higher than the total denominator (127,732). Further details on this are in the Short and Long Term Return section of the data quality appendix.

Outcome – time series findings

Table 1G.2 shows the proportion of adults in England with learning disabilities who live in their own home or with their family increased from 74.0 per cent in 2014-15 to 75.4 per cent in 2015-16.

Table 1G.2: Proportion of adults with learning disabilities who live in their own home or with their family; by year

England, 2015-16	<i>Numbers and percentages</i>		
	Numerator	Denominator	Outcome
2014-15	92,178	124,611	74.0
2015-16	96,288	127,732	75.4

Source: SALT

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT

report¹² which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

¹² <http://digital.nhs.uk/pubs/commcaressa1516>

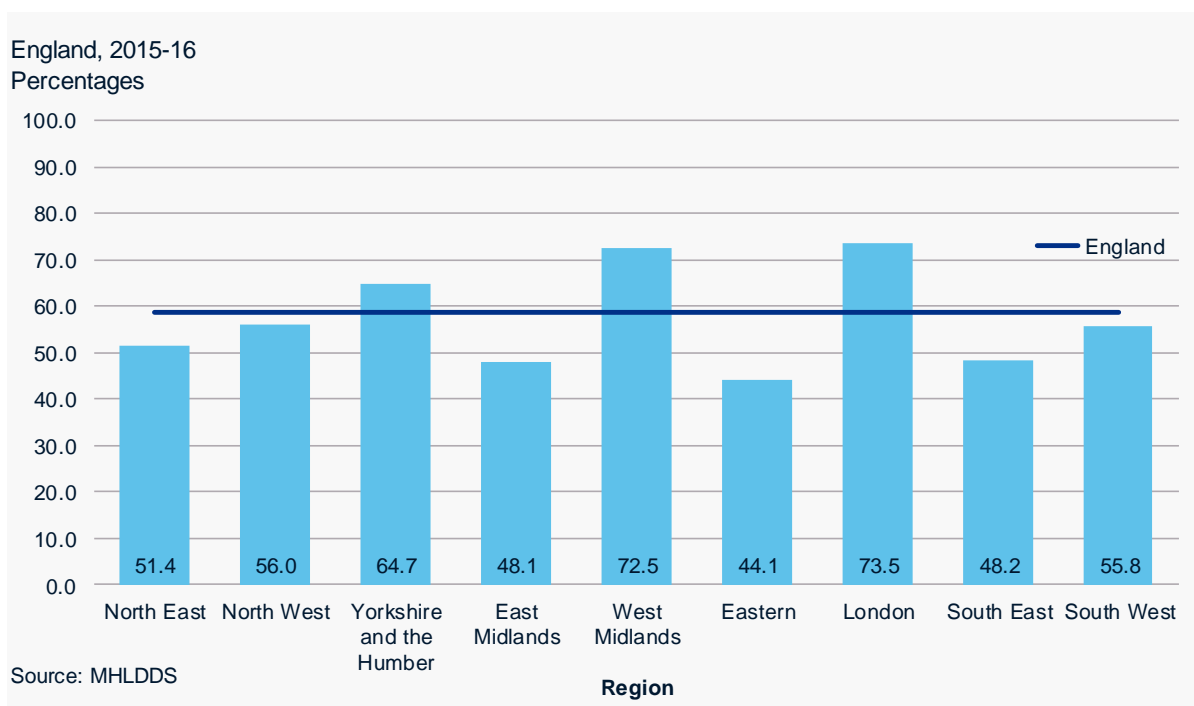
1H: Proportion of adults in contact with secondary mental health services living independently, with or without support

Outcome – 2015-16 findings

58.6 per cent of adults in England in contact with secondary mental health services were reported to be living independently, with or without support in 2015-16.

Figure 1H.1 shows how this varies by region. London (73.5 per cent) and West Midlands (72.5 per cent) have the highest proportion of adults in contact with secondary mental health services living independently, whilst Eastern (44.1) has the lowest.

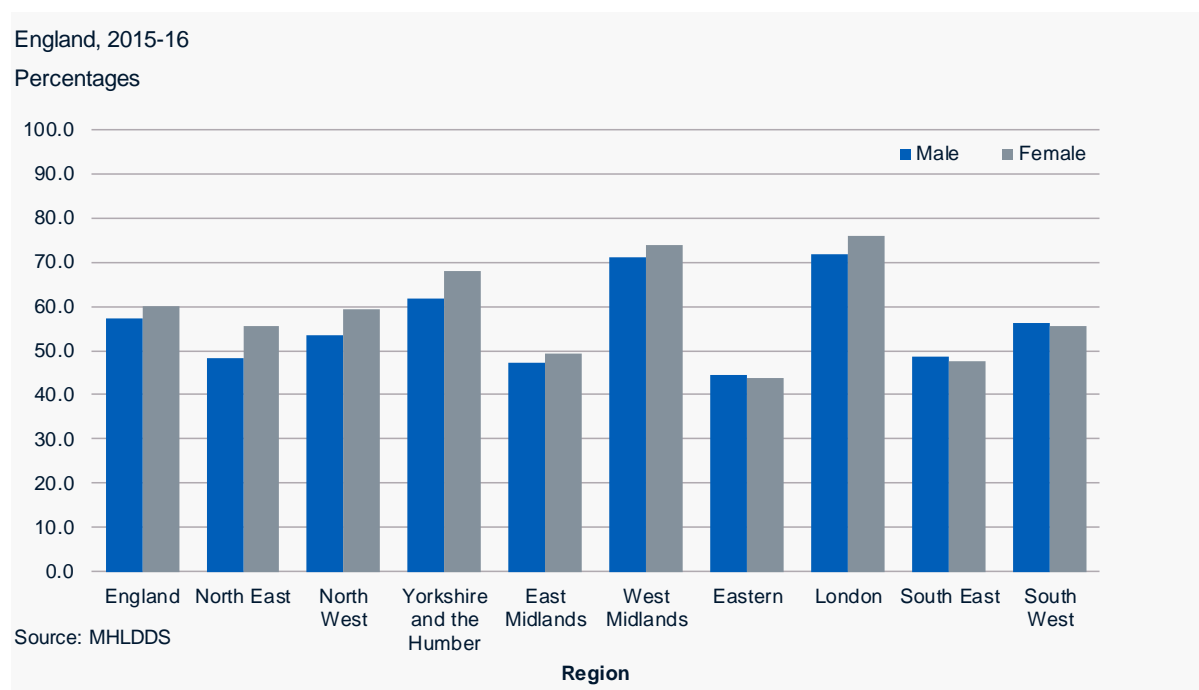
Figure 1H.1: Proportion of adults in contact with secondary mental health services living independently, with or without support; by region



In England, a higher proportion of females (60.0 per cent) in contact with secondary mental health services were reported to be living independently compared to males (57.4 per cent). This pattern however, varied at regional level.

Figure 1H.2 shows for six of the regions, there are a higher proportion of females living independently compared to males. In Eastern, South East and South West there are a higher proportion of males living independently.

Figure 1H.2: Proportion of adults in contact with secondary mental health services living independently, with or without support; by gender and region



Outcome – time series findings

Due to changes in the Mental Health Data set in January 2016, the 2015-16 outcomes are based on eight months of data rather than the usual 12. Further details are provided in Appendix C (comparability over time).

Table 1H.2 shows the proportion of adults in England in contact with secondary mental health services living independently, with or without support, has fallen each year since 2013-14.

Table 1H.2: Proportion of adults in contact with secondary mental health services living independently, with or without support; by year

England, 2015-16 Percentages	
	Outcome
2013-14	60.8
2014-15	59.7
2015-16	58.6

Source: MHLDDS / MHMDS

11: Proportion of people who use services, and their carers, who reported that they had as much social contact as they would like

Outcome – 2015-16 findings

In 2015-16, 45.4 per cent of service users in England reported they had as much social contact as they would like. As the carers survey was not run in 2015-16 there are no scores for 11(2) (the proportion of carers that reported they had as much social contact as they would like).

The North East (49.9 per cent) had the highest proportion of service users that reported they had as much social contact as they would like and London (41.1 per cent) had the lowest proportion. Although no region is statistically significantly lower than the others, the North East is statistically significantly higher than all other regions on this measure.

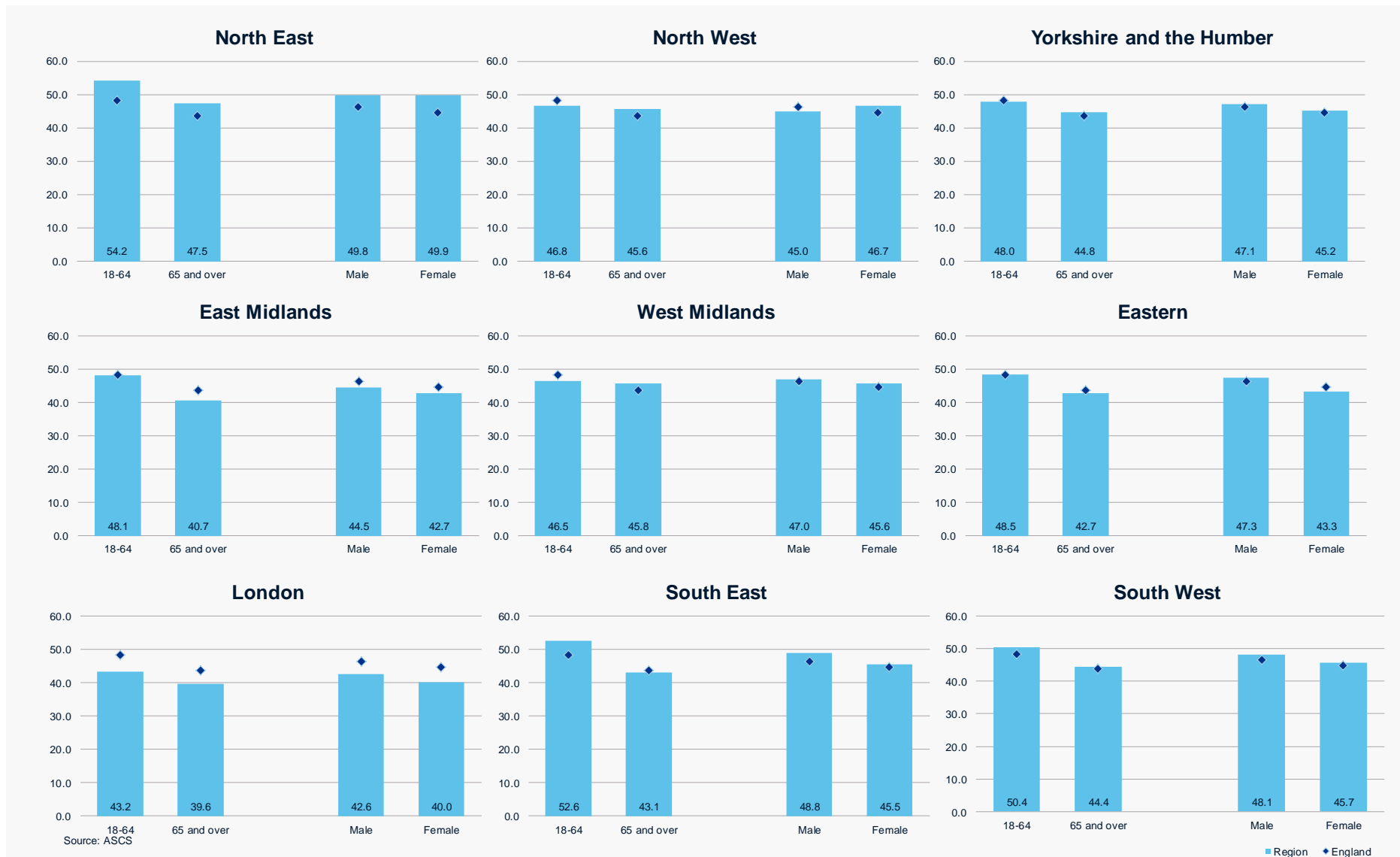
Figure 11.1 shows the proportion of services users who reported they had as much social contact as they would like by region, age and gender. The chart shows that for England and seven of the nine regions, a higher proportion of males reported they had as much social contact as they would like compared to females. For England and all regions, the 18-64 age group reported a higher proportion of service users that had as much social contact as they would like compared to the 65 and over age group.

The proportion of male service users that reported they had as much social contact as they would like varied from 49.8 per cent (North East) to 42.6 per cent (London). The proportion for females varied from 49.9 (North East) to 40.0 per cent (London).

The proportion of 18-64 year old service users that reported they had as much social contact as they would like varied from 54.2 per cent (North East) to 43.2 per cent (London). The proportion for service users aged 65 and over varied from 47.5 (North East) to 39.6 per cent (London).

For details of the outcomes at national and regional level, see **Table 11.1** and **Table 11.2** of the Report Tables and Charts Annex.

Figure 11.1: The proportion of users who reported that they had as much social contact as they would like; by region, age and gender (11(1))



Outcome – time series findings

Table 11.3 shows the proportion of service users who reported they had as much social contact as they would like increased from 44.8 per cent in 2014-15 to 45.4 per cent in 2015-16. The increase is not statistically significant.

Table 11.3: The proportion of service users who reported that they had as much social contact as they would like, by year

England, 2015-16	<i>Sample sizes and percentages</i>	
	Sample size	Outcome
2014-15	67,615	44.8
2015-16	70,741	45.4

Source: ASCS

The source data for this measure is collected via question 8a of the Adult Social Care Survey with scores calculated as the proportion of respondents who report that they have as much social contact as they want with people they like.

Although the changes observed for England on this response option between 2015-16 and 2014-15 are not statistically significant, two of the remaining three response options have seen statistically significant changes compared to 2014-15:

- the proportion of respondents who stated that they have little social contact with people and feel socially isolated has increased from 5.1 per cent in 2014-15, to 5.6 per cent in 2015-16; a statistically significant increase, and
- the proportion of respondents reporting that they had adequate social contact in 2015-16 (32.6 per cent) represents a statistically significant reduction of 1.0 percentage point compared to the 33.6 per cent who responded similarly in 2014-15

Further information can be found in the Adult Social Care Survey publication¹³.

¹³ <http://www.digital.nhs.uk/pubs/adusoccaresurv1516>

Chapter 4: Domain 2 - Delaying and reducing the need for care and support

This chapter focuses on the second domain in the ASCOF: delaying and reducing the need for care and support. The ASCOF states that “the following outcome statements support this domain:

- Everybody has the opportunity to have the best health and wellbeing throughout their life, and can access support and information to help them manage their care needs.
- Earlier diagnosis, intervention and reablement mean that people and their carers are less dependent on intensive services.
- When people develop care needs, the support they receive takes place in the most appropriate setting, and enables them to regain their independence.”

The measures in this domain are sourced from multiple collections: the Short and Long Term (SALT) activity return, ONS mid-year population estimates, Hospital Episode Statistics (HES) and Delayed Transfers of Care (DToC).

A summary of all the measure outcomes for domain 2 is provided in **Table 1.2** in Chapter 2 (summary of ASCOF Measures). Before making comparison over time the information in Appendix C (comparability over time), should be considered.

The Department of Health’s Handbook of Definitions¹⁴ provides the rationale, definition, formula and worked example of each measure.

¹⁴ <https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascof-2015-to-2016>

2A: Long-term support needs met by admission to residential and nursing care homes, per 100,000 population

Outcome – 2015-16 findings

In 2015-16, 13.3 per 100,000 population of younger adults were reported to have had their long-term support needs met by admission to residential and nursing care homes (measure 2A(1)). For the 65 and over age group (measure 2A(2)), this rate was 628.2.

Figure 2A.1 shows how the proportion of younger adults (aged 18-64) that had their long-term support needs met by admission to residential and nursing care homes varies across the regions. The North East and Eastern had the highest reported proportions of younger adults whose long-term support needs were met by admission to residential and nursing care homes (15.9 and 15.8 per 100,000 population respectively), whilst London had the lowest (10.2 per 100,000 population).

Figure 2A.1: Number of adults aged 18 to 64 whose long-term support needs were met by admission to residential and nursing care homes, per 100,000 population; by region (2A(1))

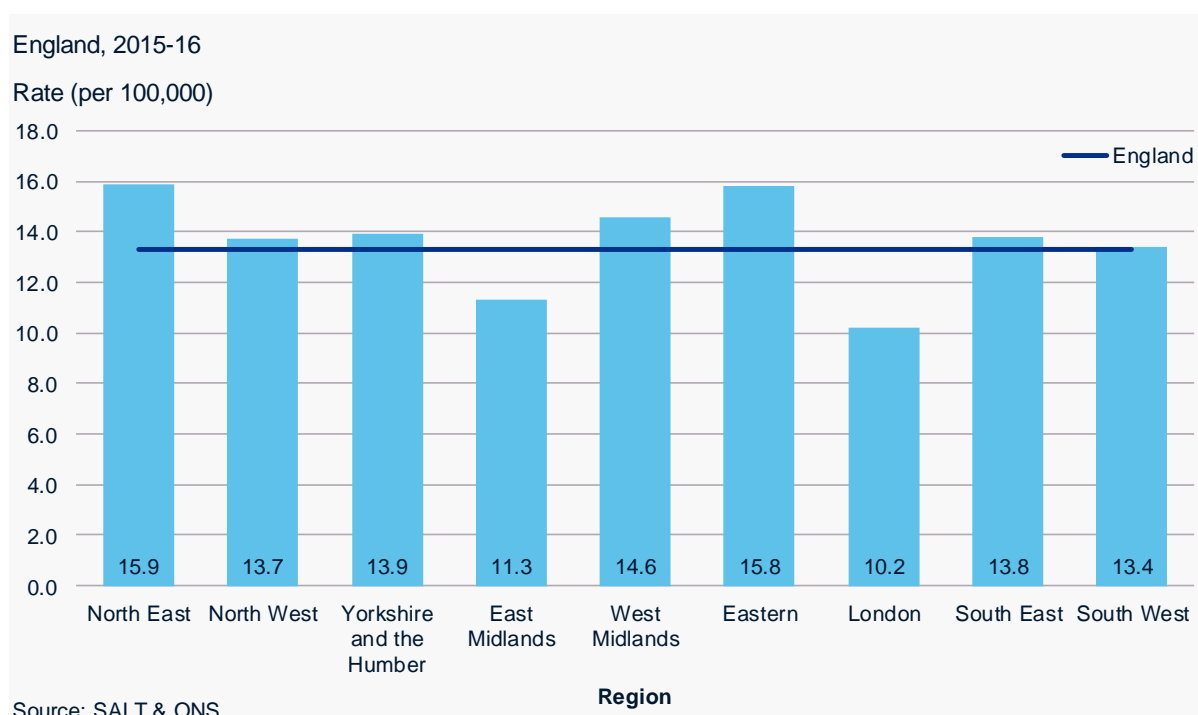
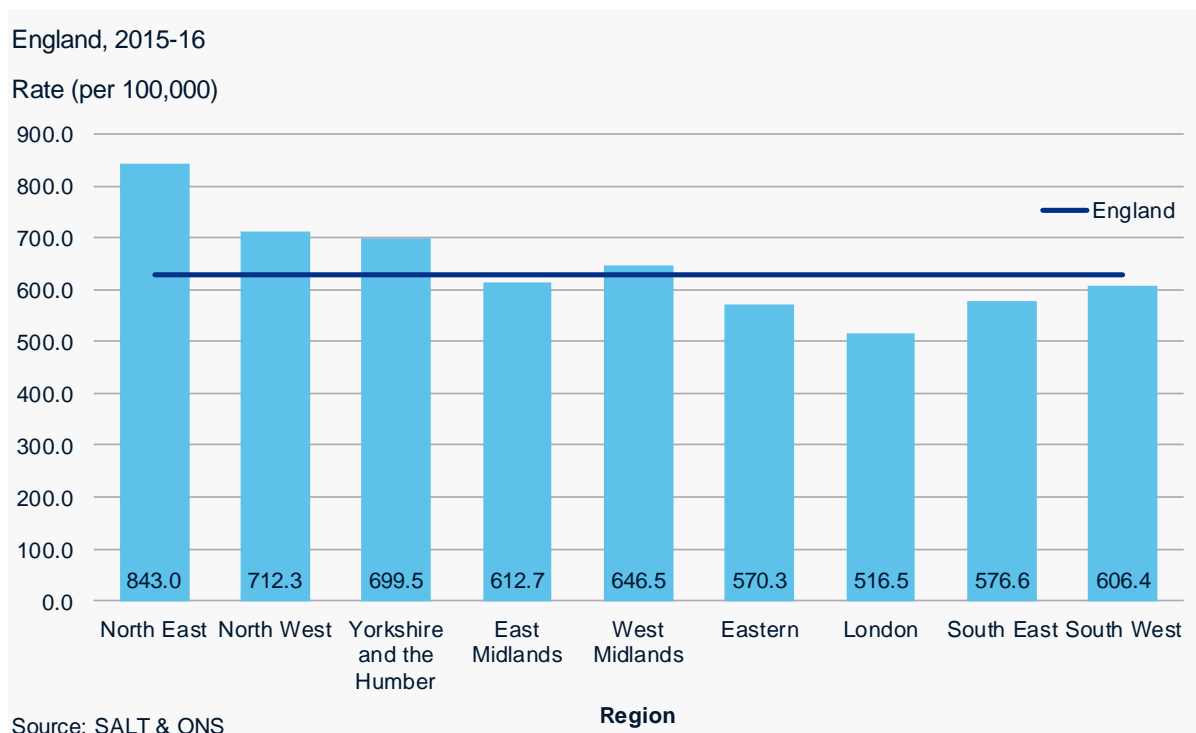


Figure 2A.2 shows how the proportion of adults aged 65 and over that had their long-term support needs met by admission to residential and nursing care homes varies across the regions. The North East had the highest reported proportion (843.0 per 100,000 population), whilst London had the lowest proportion (516.5 per 100,000 population).

Figure 2A.2: The number of adults aged 65 and over whose long-term support needs were met by admission to residential and nursing care homes, per 100,000 population (2A(2)); by region



In most of the regions, those that have a higher reported proportion of younger adults whose long-term support needs were met by admission to residential and nursing homes also have higher reported proportions of older adults whose long-term support needs were met by admission to residential and nursing homes. The main exception to this is the Eastern region which has the second highest proportion of younger adults (15.8 per 100,000 population), but the second lowest proportion of older adults (570.3 per 100,000 population).

Outcome – time series findings

Tables 2A.2 and **2A.3** show the reported proportions of younger and older adults whose long term support needs were met by admission to residential and nursing homes decreased between 2014-15 and 2015-16.

In summary:

- The rate for adults aged 18-64 dropped from 14.1 per 100,000 population in 2014-15 to 13.3 per 100,000 population in 2015-16 (**Table 2A.2**), and

Table 2A.2: Number of adults aged 18 to 64 whose long-term support needs were met by admission to residential and nursing care homes, per 100,000 population; by year (2A(1))

England, 2015-16		<i>Numbers and rates</i>	
		2A(1)	
	Numerator	Denominator	Outcome
2014-15	4,667	33,187,209	14.1
2015-16	4,451	33,396,899	13.3

Source: SALT & ONS

- The rate for adults aged 65 and over dropped from 658.5 per 100,000 population in 2014-15 to 628.2 per 100,000 population in 2015-16 (**Table 2A.3**)

Table 2A.3: Number of adults aged 65 and over whose long-term support needs were met by admission to residential and nursing care homes, per 100,000 population; by year (2A(2))

England, 2015-16		<i>Numbers and rates</i>	
		2A(2)	
	Numerator	Denominator	Outcome
2014-15	62,803	9,537,708	658.5
2015-16	61,010	9,711,572	628.2

Source: SALT & ONS

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report¹⁵ which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

This measure relates to admissions to residential and nursing care homes, per 100,000 population. Councils have advised us that in 2014-15 and 2015-16 there could be variation between recording intended admissions, as the guidance states, and capturing actual admissions.

¹⁵ <http://digital.nhs.uk/pubs/commcaressa1516>

2B: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services

Outcome – 2015-16 findings

In 2015-16, 82.7 per cent of older people (aged 65 and over) were reported as still being at home 91 days after discharge from hospital into reablement / rehabilitation services (2B(1)); with 2.9 per cent of older people (aged 65 and over) reported as having received reablement / rehabilitation services after discharge from hospital (2B(2)).

Figure 2B.1 shows how the proportion of older people who were reported as still being at home 91 days after discharge from hospital into reablement / rehabilitation services varies by region. The North East has the highest proportion still at home (85.5 per cent) and the lowest proportion was in the West Midlands (80.2 per cent).

Figure 2B.1: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (2B(1)); by region

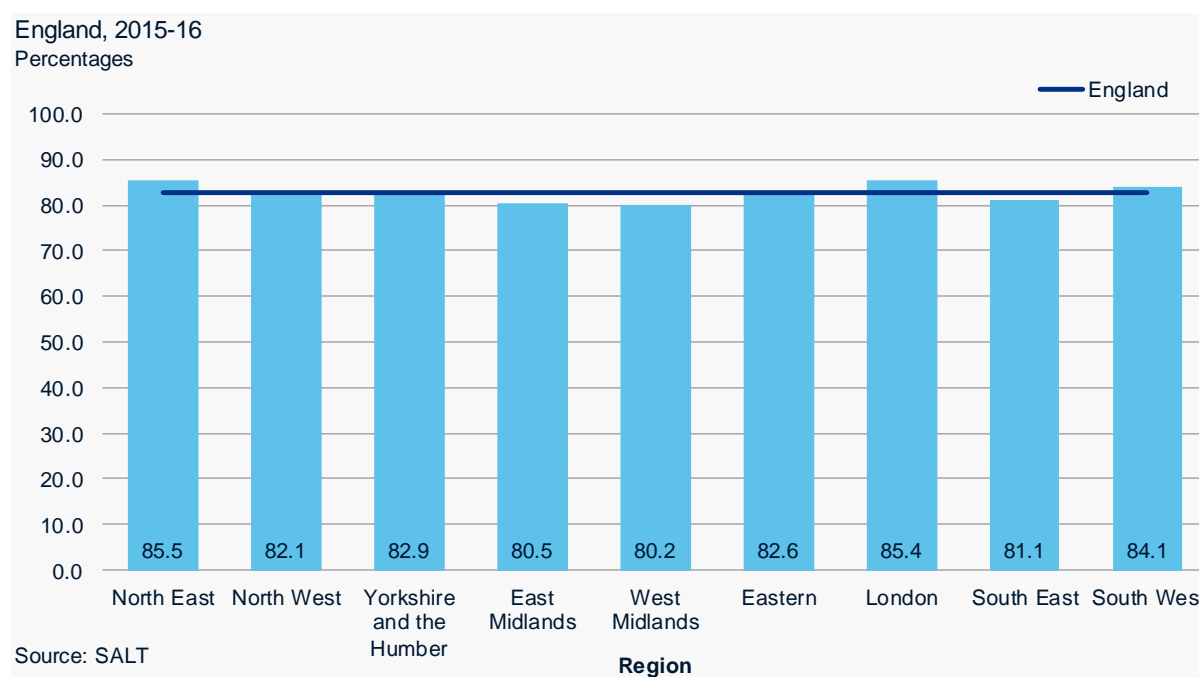


Figure 2B.2 shows how the proportion of older people who received reablement / rehabilitation services after discharge from hospital varies across regions. London was the region with the highest proportion (3.9 per cent) whilst the region with the lowest reported proportion was East Midlands (2.3 per cent).

Figure 2B.2: The proportion of people aged 65 and over who received reablement services following discharge from hospital (2B(2)); by region



Table 2B.1 shows a higher proportion of females (84.2 per cent) were still at home 91 days after discharge from hospital into reablement / rehabilitation services than males (80.2 per cent) across all regions.

The rate for males varied between 76.1 per cent (West Midlands) and 83.9 per cent (North East), while the rate for females varied between 81.4 per cent (East Midlands) to 87.3 per cent (London).

Table 2B.1: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (2B(1)); by gender and region

England, 2015-16	<i>Numbers and percentages</i>								
	Male			Female			Total		
	Num.	Denom.	Outcome	Num.	Denom.	Outcome	Num.	Denom.	Outcome
England	12,719	15,861	80.2	22,441	26,649	84.2	35,160	42,510	82.7
North East	869	1,036	83.9	1,638	1,895	86.4	2,507	2,931	85.5
North West	1,787	2,210	80.9	3,342	4,035	82.8	5,129	6,245	82.1
Yorkshire and the Humber	1,608	1,991	80.8	2,337	2,767	84.5	3,945	4,758	82.9
East Midlands	889	1,125	79.0	1,520	1,867	81.4	2,409	2,992	80.5
West Midlands	1,293	1,700	76.1	2,377	2,878	82.6	3,670	4,578	80.2
Eastern	1,277	1,605	79.6	2,347	2,780	84.4	3,624	4,385	82.6
London	1,890	2,297	82.3	3,151	3,609	87.3	5,041	5,906	85.4
South East	1,725	2,201	78.4	3,014	3,646	82.7	4,739	5,847	81.1
South West	1,381	1,696	81.4	2,715	3,172	85.6	4,096	4,868	84.1

Source: SALT

Table 2B.2 shows in England, as the age group increases, the proportion still at home 91 days after discharge decreases. For people aged 65-74, 85.4 per cent were still at home. For those aged 75-84, 84.2 per cent were still at home. For those aged 85 and over, 80.4 per cent were still at home 91 days after discharge from hospital into reablement / rehabilitation services.

In summary:

- In all regions a higher proportion of people aged 65-74 were still at home 91 days after discharge from hospital into reablement / rehabilitation services than those aged 85 and over.
- The rate for 65-74 varied from 82.3 per cent (West Midlands) to 88.7 per cent (North East).
- The rate for 75-84 varied from 80.9 per cent (West Midlands) to 87.1 per cent (North East).
- The rate for 85 and overs varied from 76.3 per cent (East Midlands) to 83.2 per cent (London).

Table 2B.2: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (2B(1)); by age and region

England, 2015-16		<i>Numbers and percentages</i>								
		65-74			75-84			85 and over		
		Num.	Denom.	Outcome	Num.	Denom.	Outcome	Num.	Denom.	Outcome
England		5,747	6,728	85.4	14,105	16,749	84.2	15,308	19,033	80.4
North East		471	531	88.7	1,076	1,236	87.1	960	1,164	82.5
North West		935	1,107	84.5	2,078	2,455	84.6	2,116	2,683	78.9
Yorkshire and the Humber		625	728	85.9	1,553	1,856	83.7	1,767	2,174	81.3
East Midlands		395	470	84.0	966	1,149	84.1	1,048	1,373	76.3
West Midlands		571	694	82.3	1,467	1,813	80.9	1,632	2,071	78.8
Eastern		472	570	82.8	1,485	1,765	84.1	1,667	2,050	81.3
London		957	1,093	87.6	2,039	2,354	86.6	2,045	2,459	83.2
South East		744	870	85.5	1,859	2,281	81.5	2,136	2,696	79.2
South West		577	665	86.8	1,582	1,840	86.0	1,937	2,363	82.0

Source: SALT

A higher proportion of females aged 65 and over (3.6 per cent) received reablement / rehabilitation services after discharge from hospital than males (2.2 per cent).

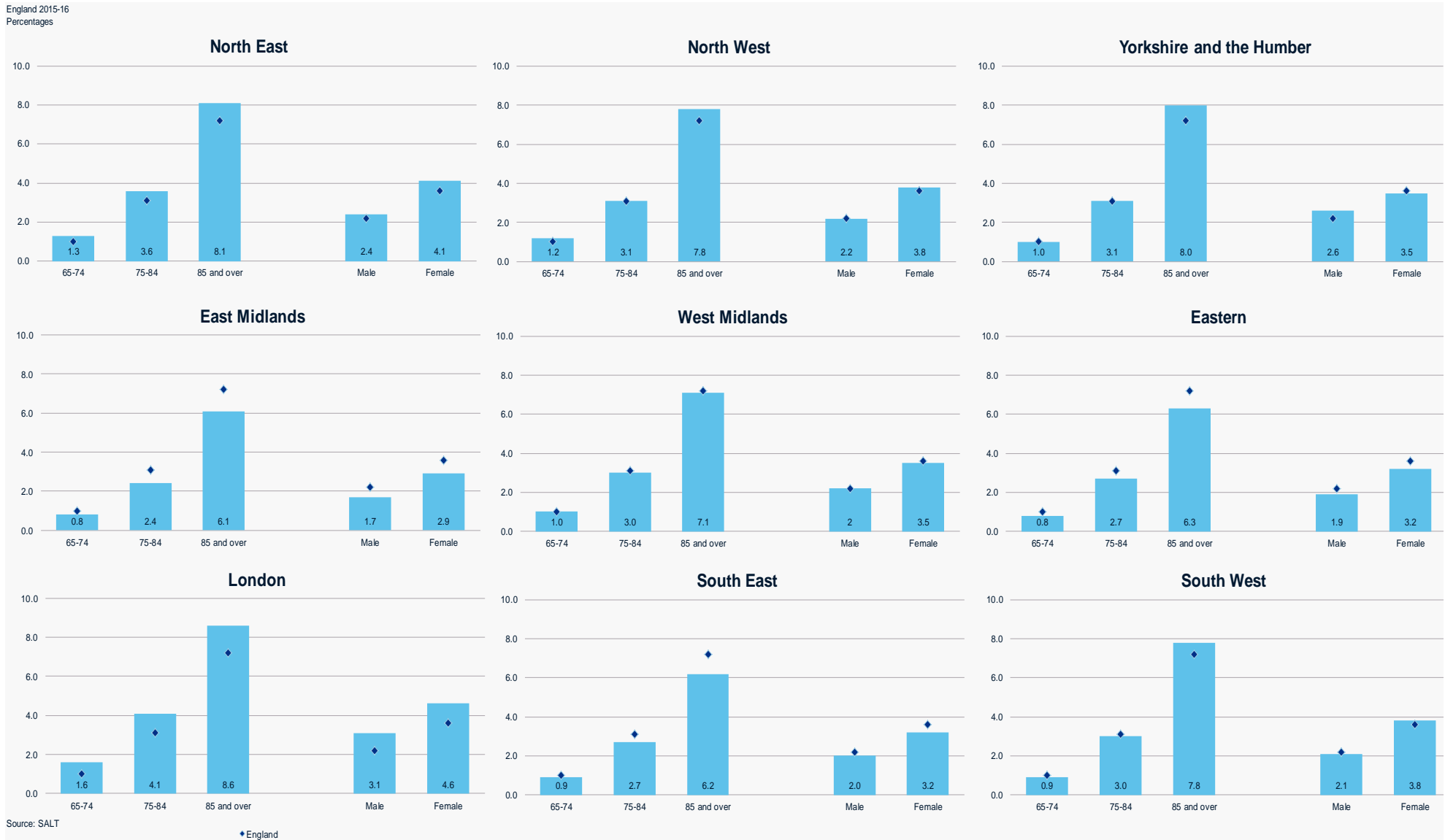
As the age group increases the proportion receiving reablement / rehabilitation services also increases:

- 1.0 per cent of 65-74 age group received reablement / rehabilitation services
- 3.1 per cent of 75-84 age group received reablement / rehabilitation services
- 7.2 per cent of 85 and over received reablement / rehabilitation services

Figure 2B.3 shows how the proportion of people receiving reablement / rehabilitation services varies by gender and age for each region. In summary:

- The proportion of people receiving reablement / rehabilitation services was higher for females than males in all regions.
- The proportion for males varied from 1.7 per cent (East Midlands) to 3.1 per cent (London).
- The proportion for females varied from 2.9 per cent (East Midlands) to 4.6 per cent (London).
- As the age group increased the proportion receiving reablement / rehabilitation services also increased for all regions.

Figure 2B.3: The proportion of people aged 65 and over who received reablement services following discharge from hospital (2B(2)); by gender, age and region



Outcome – time series findings

Table 2B.5 shows how the reported proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services has varied over the last five years. The proportion still at home increased from 81.9 per cent in 2014-15 to 82.7 per cent in 2015-16. Both the numerator and denominator decreased in 2015-16. The large denominator (the number of people discharged to rehabilitation where the intention is for the person to go back home) saw the larger decrease which resulted in an increase in the outcome score.

Table 2B.5: The proportion of older people (age 65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (2B(1)); by year

England, 2015-16	Numbers and percentages		
	2B(1)		Outcome
	Numerator	Denominator	
2010-11	30,000	36,610	82.0
2011-12	33,930	41,010	82.7
2012-13	35,340	43,410	81.4
2013-14	36,140	43,790	82.5
2014-15	35,550	43,384	81.9
2015-16	35,160	42,510	82.7

Source: SALT

Table 2B.6 shows how the proportion of people aged 65 and over who received reablement services following discharge from hospital has varied over the last five years. The proportion decreased from 3.1 per cent in 2014-15 to 2.9 per cent in 2015-16. The numerator decreased and denominator increased in 2015-16, resulting in a drop in the outcome score.

Table 2B.6: The proportion of people aged 65 and over who received reablement services following discharge from hospital (2B(2)); by year

England, 2015-16	Numbers and percentages		
	2B(2)		Outcome
	Numerator	Denominator	
2010-11	36,610	1,232,710	3.0
2011-12	41,010	1,276,940	3.2
2012-13	43,410	1,340,970	3.2
2013-14	43,790	1,333,580	3.3
2014-15	43,384	1,419,303	3.1
2015-16	42,510	1,456,442	2.9

Source: SALT & HES

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report¹⁶ which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

¹⁶ <http://digital.nhs.uk/pubs/commcaressa1516>

2C: Delayed transfers of care from hospital, and those which are attributable to social care or jointly to social care and the NHS, per 100,000 population

Outcome – 2015-16 findings

12.1 adults per 100,000 population in England experienced a delayed transfer of care in 2015-16, with 4.7 per 100,000 of these being attributable to social care or jointly to social care and the NHS in 2015-16.

Figure 2C.1 and **Figure 2C.2** show the regional variation in both delayed transfers of care per 100,000 population, and those that are attributable to social care or jointly to social care and the NHS. To summarise the findings:

- Rates of delayed transfers of care varied from 5.6 per 100,000 population (North East) to 17.3 per 100,000 population (South West).
- Rates of delayed transfers of care attributable to social care or jointly to social care and the NHS varied from 1.1 per 100,000 population (North East) to 8.1 per 100,000 population (West Midlands).

In four of the five the regions, those that were above the England average for delayed transfers of care overall were also above the England average for delays attributable to social care. The exception to this is East Midlands which reports that 12.7 per 100,000 population experience a delayed transfer of care which is above the 12.1 per 100,000 England average. Their rate attributable to social care was 3.7 per 100,000 – this is below the 4.7 per 100,000 England average.

West Midlands and the South West had the highest rates of delayed transfers of care and also the highest rates of delayed transfers attributable to social care or jointly to social care and the NHS per 100,000 population.

Figure 2C.1: Delayed transfers of care from hospital, per 100,000 population (2C(1)); by region

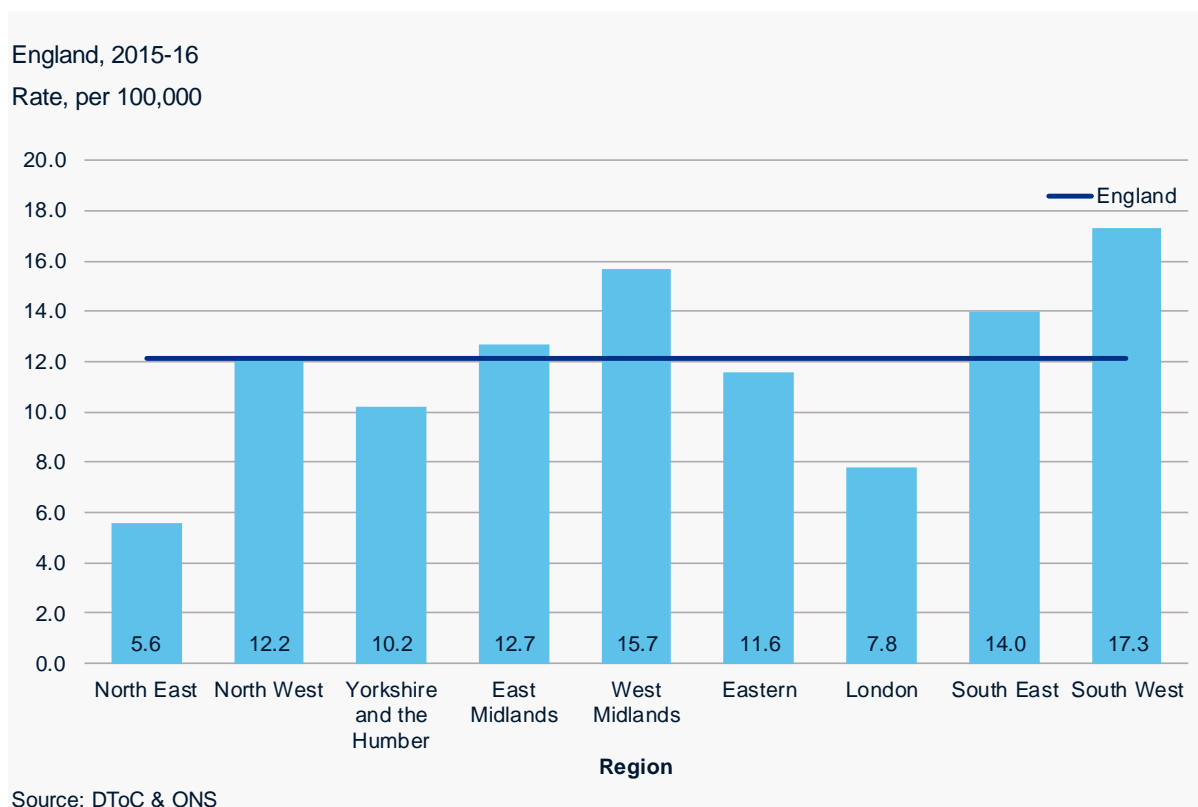
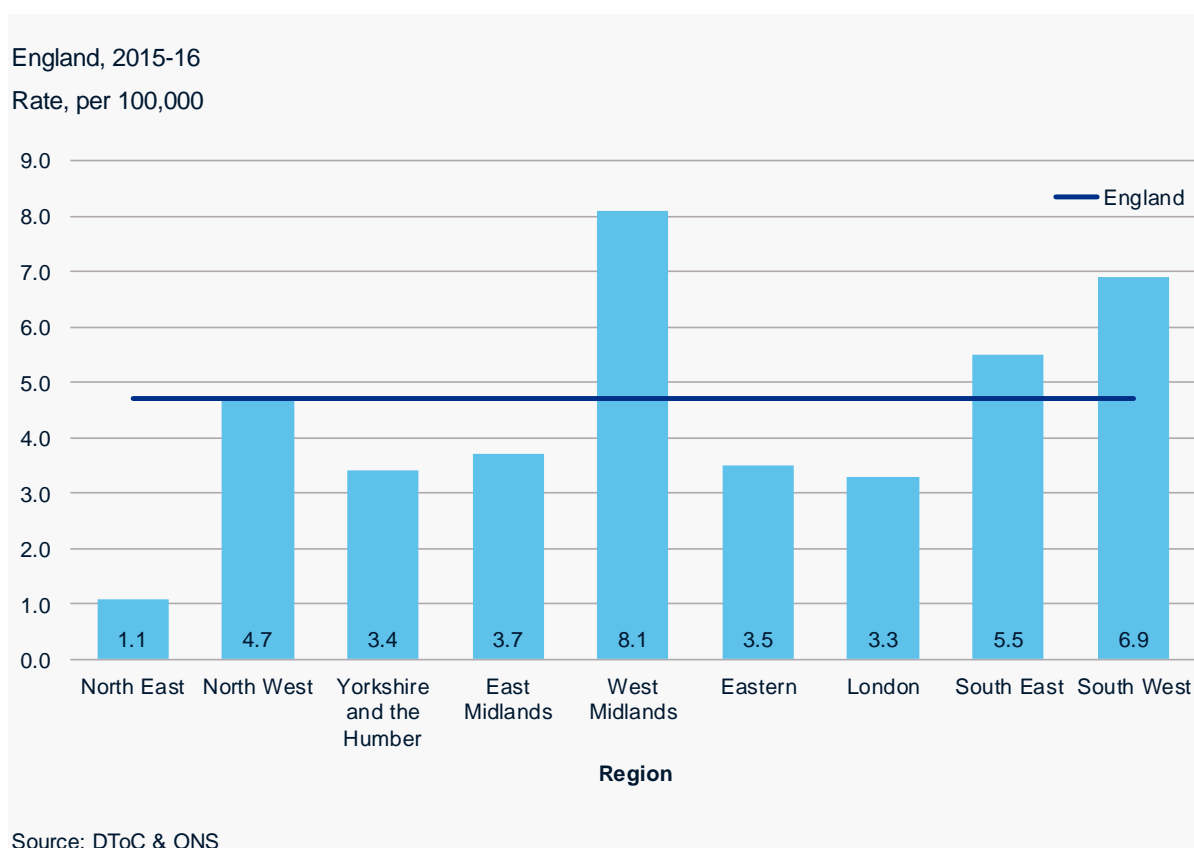


Figure 2C.2: Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population (2C(2)); by region



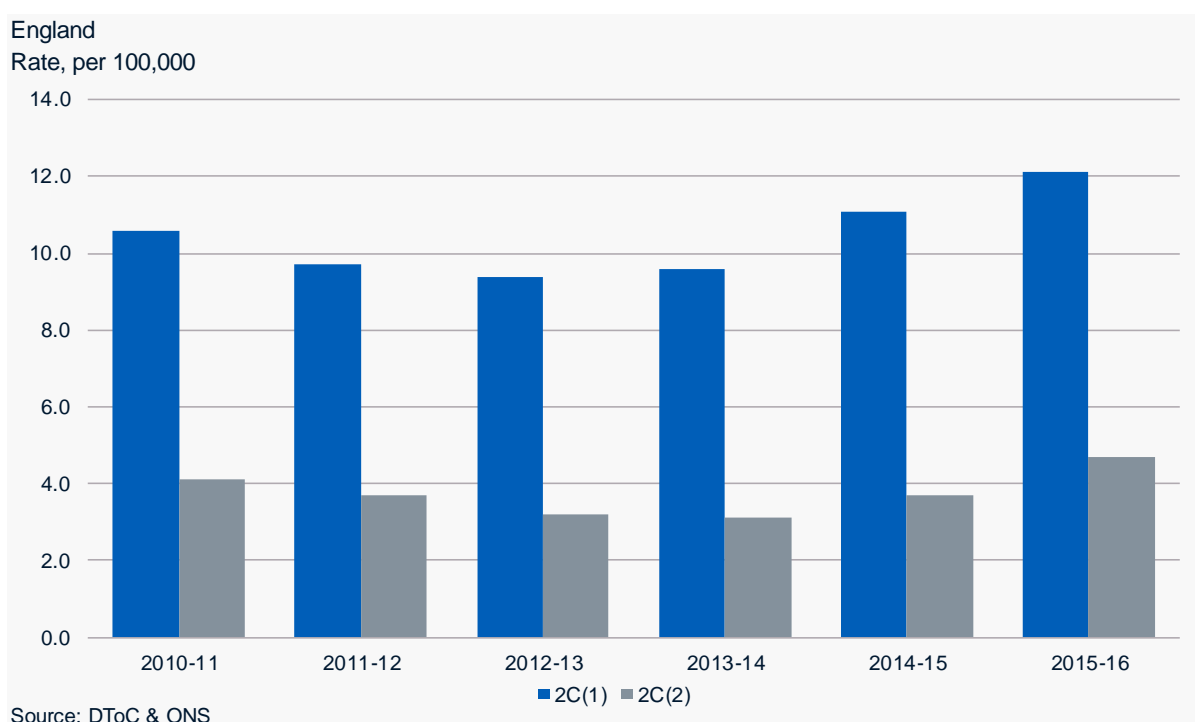
Examples of reasons for delayed transfers of care, and to which service they would be attributable can be found in the ASCOF Handbook of Definitions.

The 'Delayed Transfers of Care Statistics for England 2015/16'¹⁷ is published by NHS England and also gives more detail on the reasons for delayed transfer. In contrast to measures 2C, rather than using the ASCOF definition as the number of delayed transfers, the NHS England report analyses the reasons and attributable organisations for the number of delayed days due to delayed transfers. To further understand the reasons behind the delays, this data are still, however, of use. The 'Delayed Transfers of Care Statistics for England 2015-16' report identifies that in 2015-16, delays where the patient was awaiting further non-acute NHS care made up the largest number of delays (18.3 per cent or 330,606 of total delayed days).

Outcome – time series findings

The rates of delayed transfers of care, and those that are attributable to social care or jointly to social care and the NHS, have risen each year from 2013-14. **Figure 2C.3** shows the rate of delayed transfer of care has risen from 9.4 per 100,000 population in 2012-13 to 12.1 per 100,000 population in 2015-16.

Figure 2C.3: Delayed transfers of care from hospital, per 100,000 population (2C(1)) and delayed transfers of care from hospital that are attributable to social care, or jointly to social care and the NHS per 100,000 population (2C(2)); by year



¹⁷ <https://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2013/04/2015-16-Delayed-Transfers-of-Care-Annual-Report-1.pdf>

In reviewing the changes over time, the denominator (size of the population) has remained relatively stable over the last five years.

Table 2C.3 shows the numerator and denominator data for England from 2011-12 to 2015-16. The numerator data for measure 2C(1) (average number of delayed transfers of care) has increased from 4,086 in 2013-14 to 5,245 in 2015-16. This is a 28 per cent increase. The numerator for measure 2C(2) (average number of delays transfers of care that are attributable to social care) has increased from 1,310 in 2013-14 to 2,031 in 2015-16. This is a 55 per cent increase. The increase in the numerator data, alongside the more stable denominator data looks to have resulted in increases in the outcome scores each year from 2013-14.

Table 2C.3: Delayed transfers of care from hospital, per 100,000 population (2C(1)) and delayed transfers of care from hospital that are attributable to social care, or jointly to social care and the NHS per 100,000 population (2C(2)); by year.

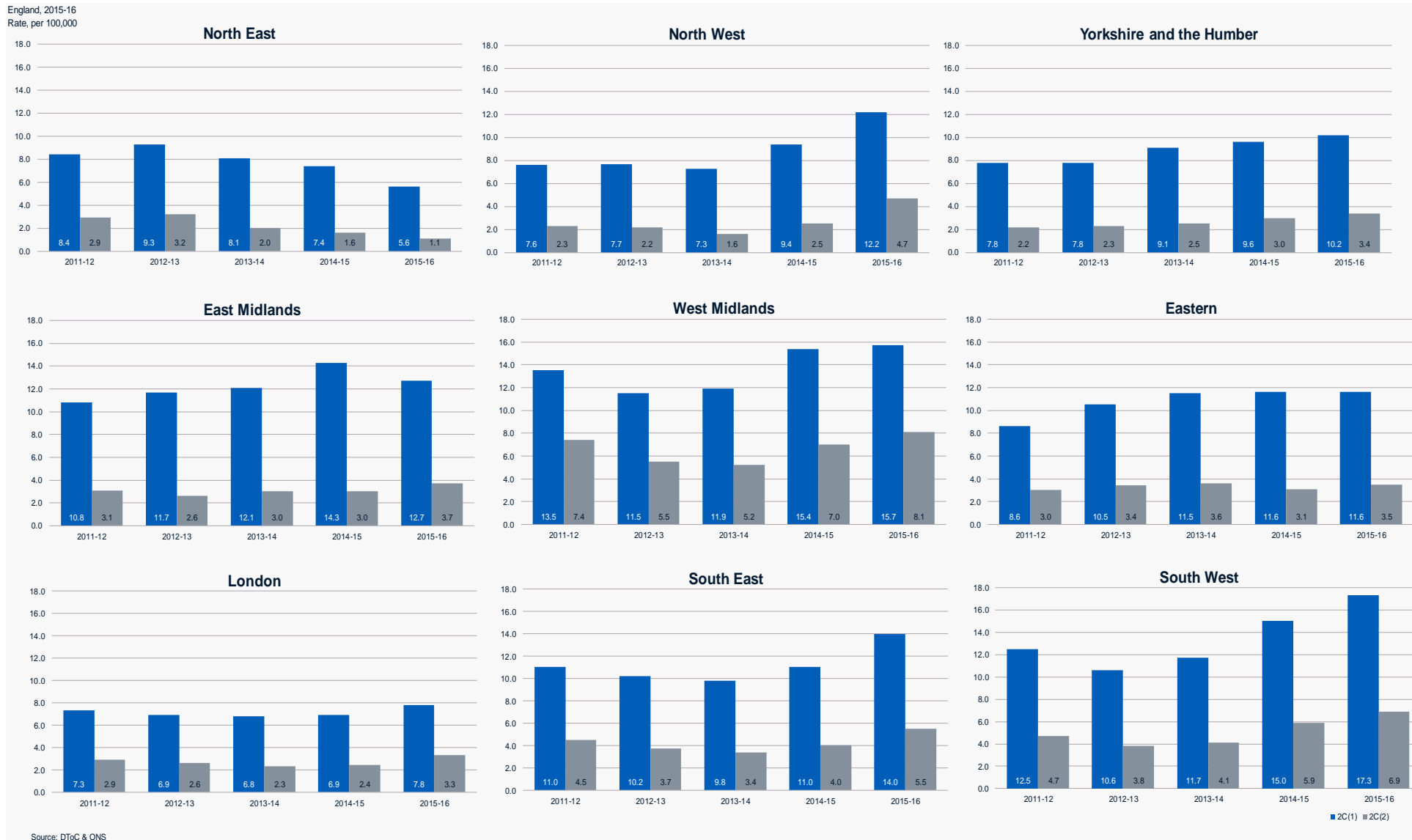
England, 2015-16	Numbers and rates					
	2C(1)			2C(2)		
	Numerator	Denominator	(rate per 100,000)	Numerator	Denominator	(rate per 100,000)
2010-11	4,365	41,188,675	10.6	1,691	41,188,675	4.1
2011-12	4,044	41,766,420	9.7	1,542	41,766,420	3.7
2012-13	3,963	42,070,420	9.4	1,365	42,070,420	3.2
2013-14	4,086	42,359,365	9.6	1,310	42,359,365	3.1
2014-15	4,726	42,724,915	11.1	1,562	42,724,915	3.7
2015-16	5,231	43,108,471	12.1	2,020	43,108,471	4.7

Source: DToC & ONS

Figure 2C.4 shows how the rate of the reported delayed transfers of care from hospital per 100,000 population varied across the nine regions in England over the last five years. The majority of regions (six out of the nine) showed a similar pattern to England with the rate increasing each year from 2013-14. The exceptions to this are;

- North East saw a year on year decrease from 2013-14.
- East Midlands saw a rise in 2014-15 but the rate dropped in 2015-16.
- The rate in the Eastern region has remained fairly static between 2013-14 and 2015-16.

Figure 2C.4: Delayed transfers of care from hospital per, 100,000 population (2C(1)) and delayed transfers of care from hospital that are attributable to social care, or jointly to social care and the NHS per 100,000 population (2C(2)); by region and year.

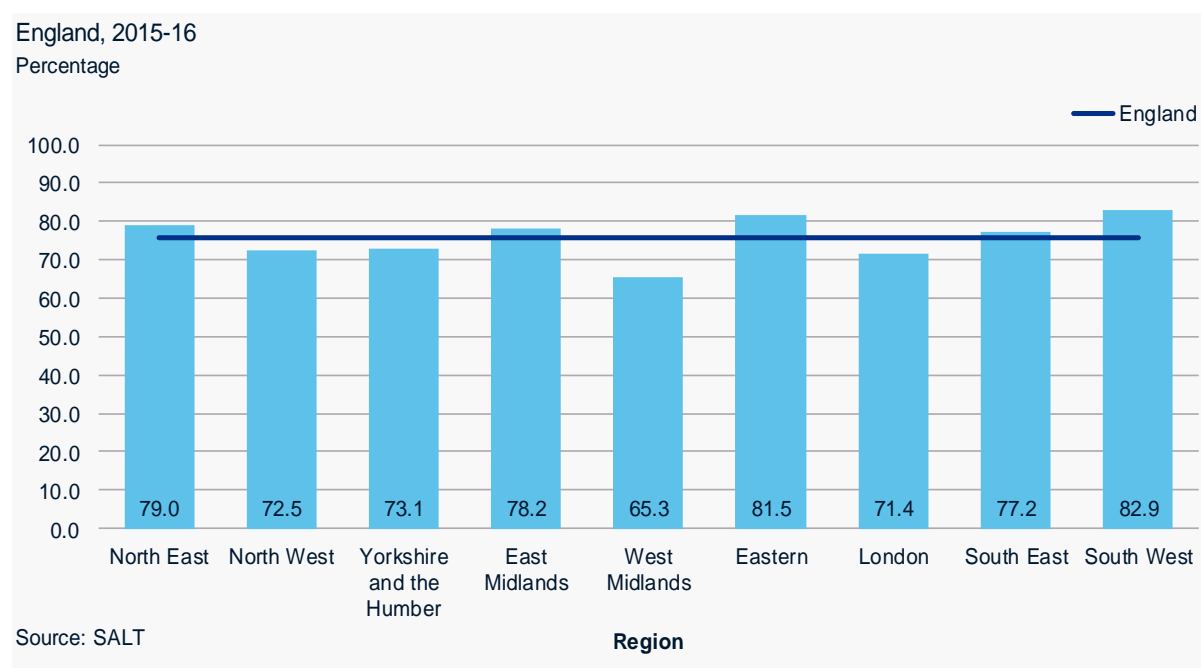


2D: The outcome of short-term services: sequel to service

Outcome – 2015-16 findings

75.8 per cent of new clients had a sequel of either no ongoing support or support at a lower level in 2015-16. **Figure 2D.1** shows how the outcomes vary across regions. South West had the highest percentage of new clients who had a sequel of either no ongoing support or support at a lower level (82.9 per cent) and West Midlands had the lowest (65.3 per cent).

Figure 2D.1: The outcome of short-term services: sequel to service; by region

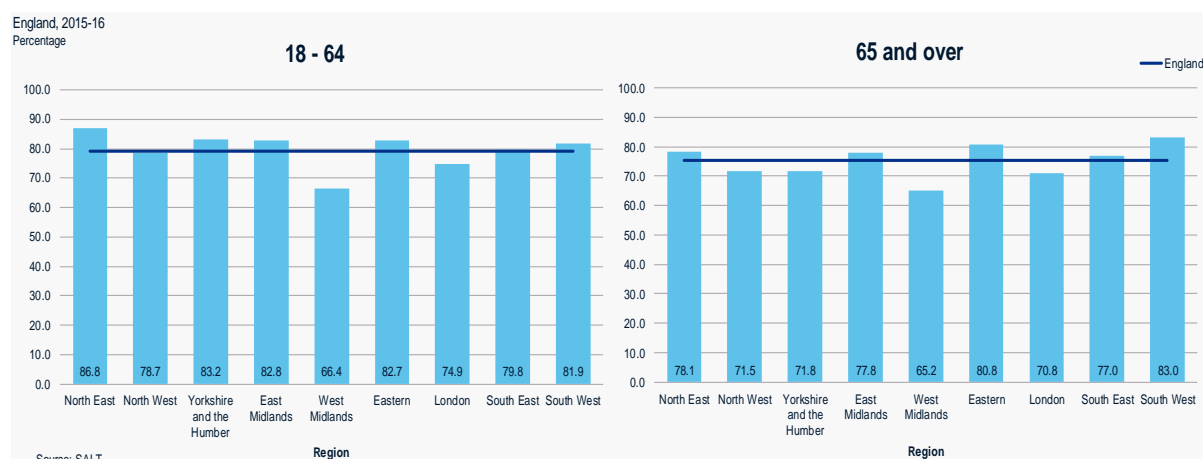


A higher proportion of new clients in the 18-64 age group (79.3 per cent) had a sequel of either no ongoing support or support at a lower level than those in the 65 and over age group (75.4 per cent). **Figure 2D.2** shows that in all regions, the proportion of 18-64 was higher than those aged 65 and over.

In summary:

- For new clients aged 18-64, the proportion that had a sequel of either no ongoing support or support at a lower level varied from 66.4 per cent (West Midlands) to 86.8 per cent (North East).
- For new clients aged 65 and over, the proportion that had a sequel of either no ongoing support or support at a lower level varied from 65.2 per cent (West Midlands) to 83.0 per cent (South West).

Figure 2D.2: The outcome of short-term services: sequel to service; by region and age



Outcome – time series findings

Table 2D.2 shows the outcome of short-term services: sequel to service over the last two years since this measure was introduced. The outcome score increased from 74.3 per cent in 2014-15 to 75.8 per cent in 2015-16.

Table 2D.2: The outcome of short-term services: sequel to service; by year

England, 2015-16	Numbers and percentages		
	Numerator	Denominator	Outcome
2014-15	119,144	160,314	74.3
2015-16	120,814	159,399	75.8

Source: SALT

Please note: this is the second year of the SALT (Short and Long Term) collection and councils were provided with the opportunity to revise their 2014-15 data; as such, some data has been updated from last year and the 2014-15 ASCOF scores contained within this report have been recalculated. These revised scores are included within table 1 and are used as the basis for comparisons over time. Further information about the resubmissions is included within the SALT report¹⁸ which explains that only some of the councils who would have liked to have reviewed their data had the technology and resources to do so. Given this, caution should be exercised when reviewing the year-on-year trends provided and additionally, the scores for this measure originally published in the 2014-15 publication should no longer be used.

¹⁸ <http://digital.nhs.uk/pubs/commcaressa1516>

Chapter 5: Domain 3 - Ensuring that people have a positive experience of care and support

This chapter looks at users of social care services and whether they had positive interactions with the support or services they have received.

The ASCOF states that “the following outcome statements support this domain:

- People who use social care and their carers are satisfied with their experience of care and support services.
- Carers feel that they are respected as equal partners throughout the care process.
- People know what choices are available to them locally, what they are entitled to, and who to contact when they need help.
- People, including those involved in making decisions on social care, respect the dignity of the individual and ensure support is sensitive to the circumstances of each individual.”

Data within this section generally come from the Adult Social Care Survey (ASCS) and Carers’ Survey (SACE). As previously noted however, the Carers’ Survey is biennial and will next be produced in 2016-17. No scores have therefore been calculated for the Carers’ Survey based measures (3B, 3C and 3D(2)) in 2015-16

A summary of all the measure outcomes for domain 3 is provided in **Table 1.3** in Chapter 2 (summary of ASCOF Measures). Before making comparison over time the information in Appendix C (comparability over time).

The Department of Health’s Handbook of Definitions¹⁹ provides the rationale, definition, formula and worked example of each measure.

¹⁹ <https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascf-2015-to-2016>

3A: Overall satisfaction of people who use services with their care and support

Outcome – 2015-16 findings

For England, 64.4 per cent of service users reported they were extremely or very satisfied with their care and support in 2015-16.

The overall level of satisfaction varies across the different regions within England however: 67.2 per cent of North East service users reported they were extremely or very satisfied with their care and support compared to 60.3 per cent of users in London. Although no region is statistically significantly higher than the others, London is statistically significantly lower than all other regions on this measure. Further details can be found in the accompanying annex files (**Tables 3A.1** and **3A.2** of Tables and Charts Annex).

In England a higher proportion of service users aged 18-64 (68.7 per cent) reported they were extremely or very satisfied with their care and support than service users aged 65 and over (61.7 per cent). In all regions, overall levels of satisfaction were higher in the 18-64 age group than the 65 and overs.

65.5 per cent of male service users in England reported they were extremely or very satisfied with their care and support compared to 63.6 per cent of female service users. In all regions in England, overall levels of satisfaction were higher for males than females.

Outcome – time series findings

Table 3A.3 shows the overall level of satisfaction decreased from 64.7 in 2014-15 to 64.4 in 2015-16. This decrease is not statistically significant.

Table 3A.3: Overall satisfaction of people who use services with their care and support; by year

England, 2015-16	<i>Sample sizes and percentages</i>	
	Sample size	Outcome
2014-15	67,715	64.7
2015-16	71,353	64.4

Source: ASCS

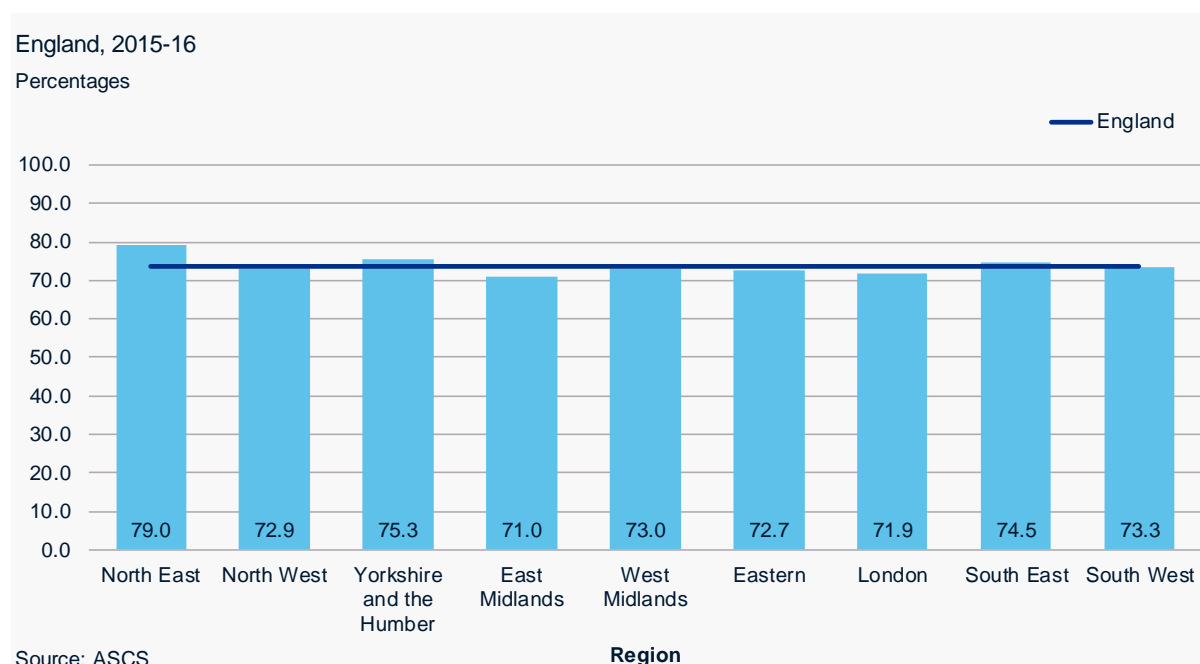
3D: The proportion of people who use services and carers who find it easy to find information about services

Outcome – 2015-16 findings

73.5 per cent of service users in England reported they found it easy to find information about services. As the carers survey was not run in 2015-16 there are no scores for 3D(2) (the proportion of carers that reported they found it easy to find information about services).

Figure 3D.1 shows how the proportion of service users that found it easy to find information about services varies across the regions. The highest proportion was reported in the North East (79.0 per cent), while the East Midlands had the lowest proportion (71.0 per cent). Although no region is statistically significantly lower than the others, the North East is statistically significantly higher than all other regions.

Figure 3D.1: The proportion of people who use services who find it easy to find information about support (3D(1)); by region



In England, and across all regions, a higher proportion of 65 and overs reported they found it easy to find information about services compared to service users aged 18-64. **Table 3D.1** shows how these reported proportions varied by age and region.

In summary:

- In England, 75.2 per cent of 65 and overs found it easy to find information compared with 70.7 per cent of service users aged 18-64.
- Scores for the 65 and over group ranged from 80.4 per cent (North East) to 72.2 per cent (London).
- Score for service users aged 18-64 ranged from 76.4 per cent (North East) to 68.3 per cent (East Midlands).

Table 3D.1: The proportion of people who use services who find it easy to find information about support (3D(1)); by region and age

England, 2015-16	Sample sizes and percentages					
	18-64		65 and over		Total	
	Sample size	Outcome	Sample size	Outcome	Sample size	Outcome
England	22,936	70.7	28,670	75.2	51,609	73.5
North East	1,462	76.4	2,052	80.4	3,514	79.0
North West	3,480	70.3	4,209	74.6	7,690	72.9
Yorkshire and the Humber	2,236	72.6	2,752	76.9	4,988	75.3
East Midlands	1,145	68.3	1,569	72.4	2,714	71.0
West Midlands	2,070	68.7	2,599	75.5	4,669	73.0
Eastern	2,120	68.7	2,699	75.0	4,819	72.7
London	5,655	71.5	6,817	72.2	12,472	71.9
South East	2,556	71.5	3,214	76.5	5,772	74.5
South West	2,212	69.5	2,759	75.5	4,971	73.3

Source: ASCS

In England, and for eight out of the nine regions, a higher proportion of males reported they found it easy to find information about services compared to females. The only exception to this was West Midlands where 74.0 per cent of females report they found it easy to find information compared with 71.6 per cent of males. **Table 3D.2** shows how the proportions of service users that reported they found it easy to find information about services varied by gender and region.

- In England, 74.0 per cent of males found it easy to find information compared with 73.1 per cent of females.
- For males, scores ranged from 80.6 per cent (North East) to 71.5 per cent (East Midlands).
- For females, scores ranged from 77.9 per cent (North East) to 70.6 per cent (East Midlands).

Table 3D.2: The proportion of people who use services who find it easy to find information about support (3D(1)); by region and gender

England, 2015-16	<i>Sample sizes and percentages</i>					
	Male		Female		Total	
	Sample size	Outcome	Sample size	Outcome	Sample size	Outcome
England	21,886	74.0	29,714	73.1	51,609	73.5
North East	1,516	80.6	1,998	77.9	3,514	79.0
North West	3,248	73.9	4,441	72.3	7,690	72.9
Yorkshire and the Humber	2,163	75.4	2,824	75.1	4,988	75.3
East Midlands	1,114	71.5	1,599	70.6	2,714	71.0
West Midlands	1,961	71.6	2,708	74.0	4,669	73.0
Eastern	2,026	73.3	2,790	72.3	4,819	72.7
London	5,373	73.1	7,096	71.1	12,472	71.9
South East	2,391	75.0	3,381	74.2	5,772	74.5
South West	2,094	73.6	2,877	73.1	4,971	73.3

Source: ASCS

Outcome – time series findings

Table 3D.3 shows the proportion of service users that found it easy to find information about services decreased from 74.5 per cent in 2014-15 to 73.5 per cent in 2015-16. This decrease is however not statistically significant.

Table 3D.3: The proportion of people who use services who find it easy to find information about support (3D(1)); by year

England, 2015-16	<i>Sample sizes and percentages</i>	
	Sample size	Outcome
2014-15	49,850	74.5
2015-16	51,609	73.5

Source: ASCS

Chapter 6: Domain 4 - Safeguarding people whose circumstances make them vulnerable and protecting from avoidable harm

This chapter focuses on safeguarding individuals receiving services, particularly of those whose circumstances make them vulnerable. The ASCOF states that “the following outcome statements support this domain:

- Everyone enjoys physical safety and feels secure.
- People are free from physical and emotional abuse, harassment, neglect and self-harm.
- People are protected as far as possible from avoidable harm, disease and injury.
- People are supported to plan ahead and have the freedom to manage risks in the way that they wish.”

For the two measures in this domain, the ASCOF Handbook of Definitions states that “safety is fundamental to the wellbeing and independence of people using social care (and others). There are legal requirements about safety in the context of service quality, including CQC’s essential standards for registered services.”

The data in this chapter are sourced from the Adult Social Care Survey (ASCS) and use information from two questions asking the service user if they feel safe in their current environment and if the support and services they receive help them feel safer.

A summary of all the measures outcome for domain 4 is provided in **Table 1.4** in Chapter 2 (summary of ASCOF Measures). Before making comparison over time the information in Appendix C (comparability over time) should be considered.

The Department of Health’s Handbook of Definitions²⁰ provides the rationale, definition, formula and worked example of each measure.

²⁰ <https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-ascof-2015-to-2016>

4A: The proportion of people who use services who feel safe

Outcome – 2015-16 findings

69.2 per cent of service users in England reported feeling safe in 2015-16. **Figure 4A.1** shows how the proportions varied across regions. The highest was the North East where 72.9 per cent of service users reported they feel safe. The North East is also statistically significantly higher than the other regions on this measure. The lowest reported proportion was London where 65.9 per cent of service users reported they feel safe. Again, London is also statistically significantly lower than the other regions on this measure.

Figure 4A.1: The proportion of people who use services who feel safe (4A); by region

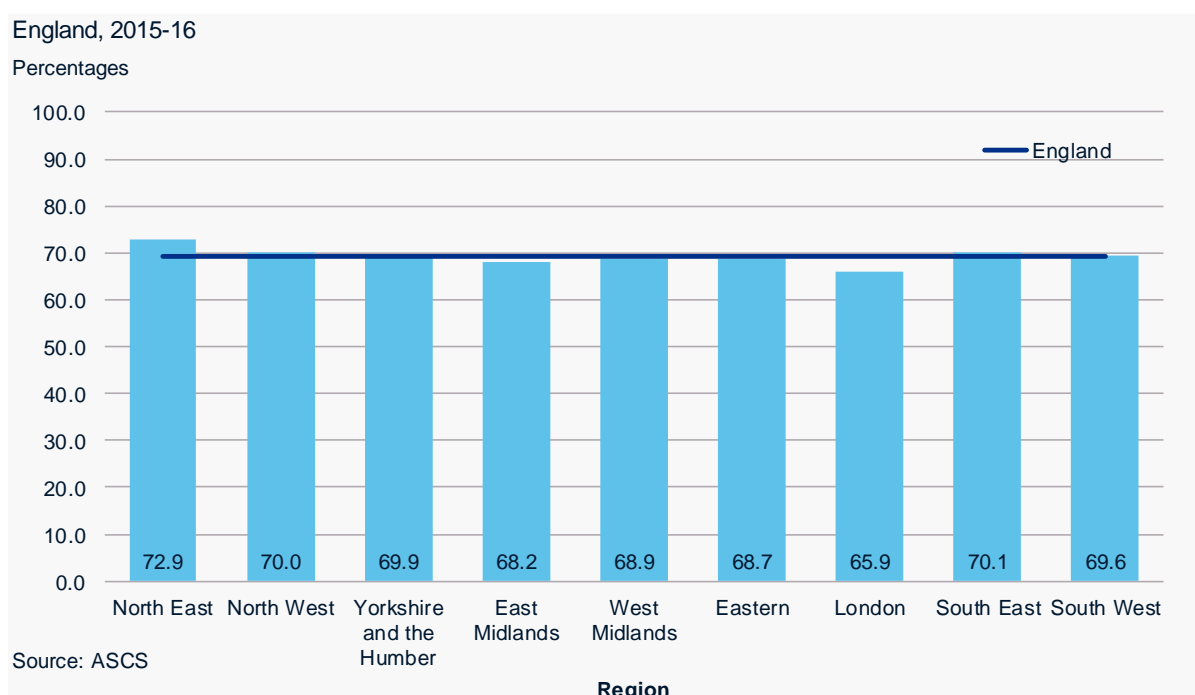


Table 4A.1 shows in England and all regions, a higher proportion of 65 and overs reported they feel safe compared to service users aged 18-64.

In summary:

- 70.7 per cent of 65 and overs in England reported they feel safe compared to 66.7 per cent of service users aged 18-64.
- For service users aged 65 and over, the proportion that feel safe varied from 75.4 per cent (North East) to 66.4 per cent (London).
- For service users aged 18-64, the proportion that feel safe varied from 69.4 per cent (South East) to 65.1 per cent (London).

Table 4A.1: The proportion of people who use services who feel safe (4A); by age and region

England, 2015-16	<i>Sample sizes and percentages</i>					
	18-64		65 and over		Total	
	Sample size	Outcome	Sample size	Outcome	Sample size	Outcome
England	29,384	66.7	41,815	70.7	71,207	69.2
North East	1,915	68.3	3,061	75.4	4,977	72.9
North West	4,484	65.3	6,318	73.0	10,806	70.0
Yorkshire and the Humber	2,908	66.1	4,247	72.1	7,155	69.9
East Midlands	1,520	66.7	2,339	69.1	3,859	68.2
West Midlands	2,751	67.1	3,855	69.8	6,606	68.9
Eastern	2,749	67.0	3,947	69.8	6,696	68.7
London	6,927	65.1	9,223	66.4	16,150	65.9
South East	3,259	69.4	4,677	70.6	7,939	70.1
South West	2,871	66.9	4,148	71.1	7,019	69.6

Source: ASCS

Table 4A.2 shows in England and in seven of the nine regions, a higher proportion of male service users report they feel safe compared to females.

In summary:

- 70.6 per cent of males in England reported they feel safe compared to 68.3 per cent of females.
- For males, the proportions varied from 72.7 per cent (North East) to 68.5 per cent (London).
- For females, the proportions varied from 73.0 per cent (North East) to 64.1 per cent (London).

Table 4A.2: The proportion of people who use services who feel safe (4A); by gender and region

England, 2015-16	<i>Sample sizes and percentages</i>					
	Male		Female		Total	
	Sample size	Outcome	Sample size	Outcome	Sample size	Outcome
England	28,934	70.6	42,259	68.3	71,207	69.2
North East	2,025	72.7	2,951	73.0	4,977	72.9
North West	4,371	69.5	6,431	70.4	10,806	70.0
Yorkshire and the Humber	2,926	70.9	4,228	69.2	7,155	69.9
East Midlands	1,525	70.0	2,333	67.2	3,859	68.2
West Midlands	2,618	71.5	3,988	67.2	6,606	68.9
Eastern	2,701	70.7	3,992	67.5	6,696	68.7
London	6,777	68.5	9,370	64.1	16,150	65.9
South East	3,157	71.4	4,781	69.2	7,939	70.1
South West	2,834	72.1	4,185	67.9	7,019	69.6

Source: ASCS

Outcome – time series findings

Table 4A.3 shows the proportion of service users in England that reported they feel safe has increased from 68.5 per cent in 2014-15 to 69.2 per cent in 2015-16. This increase is not statistically significant.

Table 4A.3: The proportion of people who use services who feel safe (4A); by year

England, 2015-16	<i>Sample sizes and percentages</i>	
	Sample size	Outcome
2014-15	67,890	68.5
2015-16	71,207	69.2

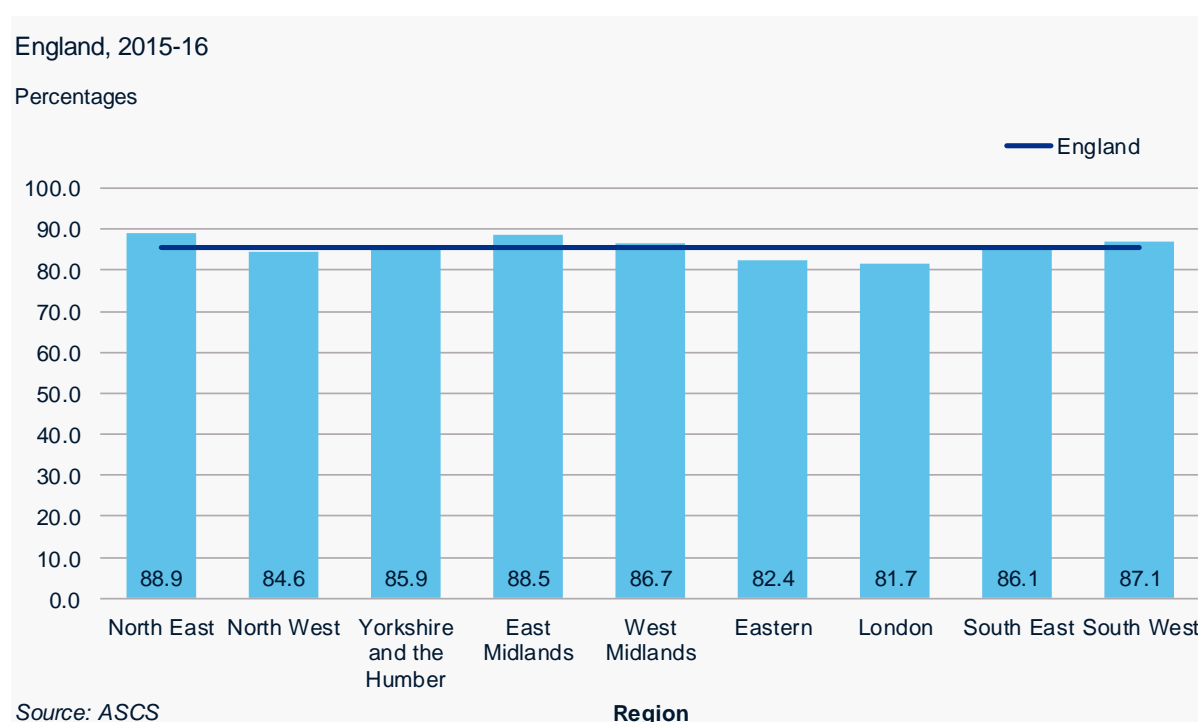
Source: ASCS

4B: The proportion of people who use services who say that those services have made them feel safe and secure

Outcome – 2015-16 findings

In 2015-16, 85.4 per cent of service users in England reported that the services they received helped make them feel safe and secure. **Figure 4B.1** shows how the proportions have varied across regions. The North East has the highest (88.9 per cent) compared with London (81.7 per cent) with the lowest. No regions however are statistically significantly different on this measure.

Figure 4B.1: The proportion of people who use services who say that those services have made them feel safe and secure (4B); by region



A higher proportion of services users aged 18-64 (86.1 per cent) felt the services have made them feel safe and secure compared to those aged 65 and over (85.0 per cent). This is in contrast to measure 4A where a higher proportion of service users aged 65 and over reported they felt safe compared with the service users aged 18-64. Further details can be found in the accompanying annex files (**Table 4B.1** of Tables and Charts Annex).

In summary:

- In seven of the nine regions, a higher proportion of the 18-64 services users reported the services have made them feel safe and secure compared to the 65 and overs. The exceptions to this are Yorkshire and the Humber and West Midlands.

- For service users aged 65 and over, proportions varied from 88.7 per cent (North East) to 79.8 per cent (London).
- For service users aged 18-64, proportions varied from 90.6 per cent (East Midlands) to 83.2 per cent (Eastern).

In England 85.5 per cent of females felt the services have made them feel safe and secure compared to 85.2 per cent of males. There was less variation between gender proportions than the age disaggregations. Further details can be found in the accompanying annex files (**Table 4B.2** of Tables and Charts Annex).

In summary:

- The proportions for male service users varied from 89.0 per cent (East Midlands) to 82.2 per cent (Eastern).
- The proportions for female service users varied from 89.5 per cent (North East) to 81.2 per cent (London).

Outcome – time series findings

Table 4B.3 shows the proportion of people who use services in England who say that those services have made them feel safe and secure has increased from 84.5 in 2014-15 to 85.4 in 2015-16. As reported in the Adult Social Care Survey, where this measure is collected via question 7b, this increase is statistically significant.

Table 4B.3: The proportion of people who use services who say that those services have made them feel safe and secure (4B); by year

England, 2015-16	<i>Sample sizes and percentages</i>	
	Sample size	Outcome
2014-15	66,440	84.5
2015-16	69,197	85.4

Source: ASCS

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